Case:16-07928-ESL7 Doc#:1 Filed:10/03/16 Entered:10/03/16 09:13:12 Desc: Main Document Page 1 of 54

Fill in this information to identify your case:		
United States Bankruptcy Court for the: District of Puerto Rico		
Case number (If known):	Chapter you are filing under: ☑ Chapter 7	
	☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13	Chec

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	Int 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture	MAYRA First name	First name
	identification (for example, your driver's license or passport).	Middle name	Middle name
	Bring your picture identification to your meeting	LOPEZ ACEVEDO Last name	Last name
	with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8		First name
	years	First name	riist name
	Include your married or maiden names.	Middle name	Middle name
+		Last name	Last name
		First name	First name
		Middle name	Middle name
		Last name	Last name
3.	Only the last 4 digits of your Social Security	xxx - xx - <u>0</u> <u>4</u> <u>9</u> <u>7</u>	xxx - xx
	number or federal	OR	OR
	Individual Taxpayer Identification number (ITIN)	9 xx - xx	9 xx - xx

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MAYRA LOPEZ ACEVEDO Case number (if known)_ Debtor 1 About Debtor 2 (Spouse Only in a Joint Case): About Debtor 1: 4. Any business names I have not used any business names or EINs. I have not used any business names or EINs. and Employer **Identification Numbers** (EIN) you have used in Business name the last 8 years Business name Include trade names and doing business as names Business name Business name EIN If Debtor 2 lives at a different address: 5. Where you live STREET 119 RAMAL 435 Km 6.2 Street PERCHAS II WARD PR 00685 SAN SEBASTIAN 7IP Code City State State ZIP Code **PUERTO RICO** County County If Debtor 2's mailing address is different from If your mailing address is different from the one above, fill it in here. Note that the court will send yours, fill it in here. Note that the court will send any notices to this mailing address. any notices to you at this mailing address. HC 4 BOX 40972 Number Street Number Street P.O. Box P.O. Box PR 00685 SAN SEBASTIAN State ZIP Code City City State ZIP Code Why you are choosing Check one: this district to file for Over the last 180 days before filing this petition, Over the last 180 days before filing this petition, bankruptcy I have lived in this district longer than in any I have lived in this district longer than in any other district. other district. ■ I have another reason. Explain. ■ I have another reason. Explain. (See 28 U.S.C. § 1408.) (See 28 U.S.C. § 1408.)

Debtor 1

MAYRA LOPEZ ACEVEDO

Case number (if known)_	

art	2: Tell the Court About	Your Ba	krupto	cy Case		
	he chapter of the ankruptcy Code you	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.				
а	re choosing to file	☑ Chapt	er 7			
u	nder	☐ Chapt	er 11			
		☐ Chapt	er 12			
		☐ Chapt				
. F	low you will pay the fee	local yours subm with a	court for elf, you itting you pre-pri d to pay cation for	e entire fee when I file my petition or more details about how you may may pay with cash, cashier's che bur payment on your behalf, your inted address. The fee in installments. If you controlly the fee in installments are for Individuals to Pay The Filing Fee.	y pay. Typically eck, or money of attorney may p choose this option in Installment	order. If your attorney is ay with a credit card or check ion, sign and attach the ots (Official Form 103A).
		By la less t	w, a jud han 150	dge may, but is not required to, wa	aive your fee, a applies to your soption, you mu	on only if you are filing for Chapter 7 nd may do so only if your income is family size and you are unable to ust fill out the Application to Have the with your petition.
	Have you filed for	☑ No				
	bankruptcy within the last 8 years?	Yes.	District	When	MM / DD / YYYY	Case number
			District	When		Case number
						Case number
			District	When	MM / DD / YYYY	Case Harrison
0	Are any bankruptcy	☑ No				
	cases pending or being filed by a spouse who is	Yes.	Debtor			Relationship to you
	not filing this case with you, or by a business partner, or by an		District	When	MM / DD / YYYY	Case number, if known
	affiliate?		Debtor			Relationship to you
						Case number, if known
11.	Do you rent your residence?	☑ No.	Go to I Has yo resider No	line 12. our landlord obtained an eviction judgi ence? o. Go to line 12.	ment against you	a and do you want to stay in your nt Against You (Form 101A) and file it w

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	Document	Page 4 of 54	
Debtor 1 MAYRA LOPE First Name Middle Name	Z ACEVEDO Last Name	Case number (# known)	
Part 3: Report About Any Bo	usinesses You Own as a Sole P	roprietor	
12. Are you a sole proprietor of any full- or part-time business? A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.	☐ Single Asset Real Estate☐ Stockbroker (as defined	State o describe your business: as defined in 11 U.S.C. § 101(27A)) e (as defined in 11 U.S.C. § 101(51B)	ZIP Code
13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? For a definition of small business debtor, see 11 U.S.C. § 101(51D).	can set appropriate deadlines. If you most recent balance sheet, stateme any of these documents do not exist ✓ No. I am not filing under Chapter 1 the Bankruptcy Code. ✓ Yes. I am filing under Chapter 1 Bankruptcy Code.	1, but I am NOT a small business del 1 and I am a small business debtor a	and federal income tax return or if 1116(1)(B). otor according to the definition in ccording to the definition in the
Part 4: Report if You Own 14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building		needed, why is it needed?	

Number

City

Where is the property?

ZIP Code

State

that needs urgent repairs?

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Debtor 1

MAYRA LOPEZ ACEVEDO

Case number (if known)	
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Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About	Debtor	1:
-------	--------	----

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about
credit counseling because of:

I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

☐ Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or

through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit
counseling agency within the 180 days before I
filed this bankruptcy petition, and I received a
certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about	ut
credit counseling because of:	

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Debtor 1

MAYRA LOPEZ ACEVEDO

Eiget Name
Last Name

Case number (if known)

		162 Are your debte primari	ly consumer debts? Consumer debts	ots are defined in 11 U.S.C. § 101(8)
	What kind of debts do you have?	as "incurred by an individua	I primarily for a personal, family, or hou	isehold purpose."
	you have:	□ No. Go to line 16b.☑ Yes. Go to line 17.		
		16b. Are your debts primari money for a business or inv	ly business debts? Business debts estment or through the operation of the	are debts that you incurred to obtain business or investment.
		No. Go to line 16c. Yes. Go to line 17.		
			owe that are not consumer debts or bu	isiness dehts
			owe that are not consumer debts of be	Silicos dobto.
17.	Are you filing under Chapter 7?	☐ No. I am not filing under Ch	apter 7. Go to line 18.	
	Do you estimate that after	Yes. I am filing under Chapte	er 7. Do you estimate that after any exess are paid that funds will be available to	empt property is excluded and odistribute to unsecured creditors?
	any exempt property is excluded and	✓ No	s are paid that failed will be available to	
	administrative expenses are paid that funds will be	☐ Yes		
	available for distribution to unsecured creditors?			
18.	How many creditors do	1 -49	1,000-5,000	25,001-50,000
	you estimate that you owe?	□ 50-99 □ 100-199	□ 5,001-10,000 □ 10,001-25,000	☐ 50,001-100,000 ☐ More than 100,000
		200-999	10,001-20,000	
19.	How much do you	2 \$0-\$50,000	\$1,000,001-\$10 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion
	estimate your assets to be worth?	\$50,001-\$100,000 \$100,001-\$500,000	□ \$10,000,001-\$50 million □ \$50,000,001-\$100 million	\$1,000,000,001-\$10 billion
	1-11/10/10	□ \$500,001-\$1 million	☐ \$100,000,001-\$500 million	☐ More than \$50 billion
20.	How much do you	\$0-\$50,000	\$1,000,001-\$10 million	\$500,000,001-\$1 billion
	estimate your liabilities to be?	□ \$50,001-\$100,000 ☑ \$100,001-\$500,000	□ \$10,000,001-\$50 million □ \$50,000,001-\$100 million	\$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion
		□ \$500,001-\$1 million	□ \$100,000,001-\$500 million	☐ More than \$50 billion
Pa	rt 7: Sign Below			
Fo	r you	correct.	nd I declare under penalty of perjury that	
		If I have chosen to file under Ch of title 11, United States Code. under Chapter 7.	apter 7, I am aware that I may proceed understand the relief available under of	I, if eligible, under Chapter 7, 11,12, or 13 each chapter, and I choose to proceed
		this document, I have obtained	and read the notice required by 11 U.S	
			th the chapter of title 11, United States	
		I understand making a false sta with a bankruptcy case can resi 18 U.S.C. §§ 152, 1341, 1519,	alt in fines up to \$250,000, or imprisonr	ng money or property by fraud in connection nent for up to 20 years, or both.
		Mony A Ju-	ps Hewito *	ure of Debtor 2
		0 35	Ĭ.	
		Executed on MM / DD /	YYYY Execu	MM / DD / YYYY

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Debtor 1 N

MAYRA LOPEZ ACEVEDO

Case number (if known)_____

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

	Date	9 30 16
Signature of Attorney for Debtor		MM / DD /YYYY
LEONIDES GRAULAN QUIÑONES Printed name		
ATTORNEY FOR DEBTOR Firm name		
PO BOX 711 Number Street		
LARES	PR	00669
City	State	ZIP Code
Contact phone (787) 897-2165	Email add	ress leograulau@yahoo.com
202504	PR State	
Bar number	State	

Fill in this information to identify your case and thi	s filing:	
Debtor 1 MAYRA LOPEZ ACEVEDO		
First Name Middle Name	Last Name	
Debtor 2 (Spouse, if filing) F#st Name Middle Name	Last Name	
United States Bankruptcy Court for the: District of Puerto R	ico	
Case number		☐ Check if this is an
		amended filing
Official Form 106A/B		
Schedule A/B: Propert		12/15
category where you think it fits best. Be as compl responsible for supplying correct information. If m write your name and case number (if known). Answer	s. List an asset only once. If an asset fits in more ete and accurate as possible. If two married people ore space is needed, attach a separate sheet to the wer every question. Land, or Other Real Estate You Own or Have	e are filing together, both are equally is form. On the top of any additional pages,
Do you own or have any legal or equitable interest	est in any residence, building, land, or similar prop	ertv?
☐ No. Go to Part 2.	erin, any rectaonee, ramang, rama, er emmar prop	
✓ Yes. Where is the property?		
	What is the property? Check all that apply. Single-family home	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D:
1.1. HOUSE AND LOT Street address, if available, or other description	Duplex or multi-unit building	Creditors Who Have Claims Secured by Property.
	☐ Condominium or cooperative ☐ Manufactured or mobile home	Current value of the entire property? Current value of the portion you own?
CARR. 119 KM 6.2	- Land	\$ 80,000.00 \$ 13,333.33
SAN SEBASTIAN PR 00685	☐ Investment property	Describe the nature of your ownership
City State ZIP Code	- ☐ Timeshare ☐ Other INHERITANCE	interest (such as fee simple, tenancy by
	Who has an interest in the property? Check one.	the entireties, or a life estate), if known.
PUERTO RICO	☑ Debtor 1 only	
County	Debtor 2 only Debtor 1 and Debtor 2 only	☐ Check if this is community property
	☐ At least one of the debtors and another	(see instructions)
	Other information you wish to add about this it property identification number:	em, such as local
If you own or have more than one, list here:	property identification number.	
	What is the property? Check all that apply.	Do not deduct secured claims or exemptions. Put
1.2. CAPITAL MGMT. MAINTENANCE	 □ Single-family home □ Duplex or multi-unit building 	the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.
Street address, if available, or other description	Condominium or cooperative	Current value of the Current value of the
PO BOX 864964	Manufactured or mobile home	entire property? portion you own?
	☐ Land ☐ Investment property	\$10,000.00
ORLANDO FL 32886 City State ZIP Code	☑ Timeshare	Describe the nature of your ownership interest (such as fee simple, tenancy by
	Other	the entireties, or a life estate), if known.
	Who has an interest in the property? Check one. Debtor 1 only	
FLORIDA County	Debtor 1 only Debtor 2 only	
County	Debtor 1 and Debtor 2 only	☐ Check if this is community property
	☐ At least one of the debtors and another	(see instructions)
	Other information you wish to add about this ite	m, such as local

Case:16-07928-ESL7 Doc#:1 Filed:10/03/16 Entered:10/03/16 09:13:12 Desc: Main Document Page 9 of 54 MAYRA LOPEZ ACEVEDO Case number (if known Debtor 1 What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: ■ Single-family home VACATION VILLAGE AT PARKW/ Creditors Who Have Claims Secured by Property. Duplex or multi-unit building Street address, if available, or other description Current value of the Current value of the Condominium or cooperative portion you own? entire property? PO BOX 405947 Manufactured or mobile home 9,000.00 9,000.00 ☐ Land Investment property FORTLAUDERDALI FL 33335 Describe the nature of your ownership Timeshare ZIP Code interest (such as fee simple, tenancy by Other the entireties, or a life estate), if known. Who has an interest in the property? Check one. FLORIDA Debtor 1 only County Debtor 2 only Check if this is community property Debtor 1 and Debtor 2 only (see instructions) At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: Annual maintenance 2 Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages 32,333.33 you have attached for Part 1. Write that number here. **Describe Your Vehicles** Part 2: Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No ☑ Yes KIA Who has an interest in the property? Check one. Do not deduct secured claims or exemptions. Put Make: 3.1 the amount of any secured claims on Schedule D. SOUL Debtor 1 only Creditors Who Have Claims Secured by Property Model

Debtor 2 only 2011 Year: Current value of the Current value of the Debtor 1 and Debtor 2 only entire property? portion you own? 80533 Approximate mileage: At least one of the debtors and another Other information: 8,675.00 8,675.00 Check if this is community property (see instructions) If you own or have more than one, describe here: Who has an interest in the property? Check one. Do not deduct secured claims or exemptions. Put 3.2. Make: the amount of any secured claims on Schedule D: Debtor 1 only Creditors Who Have Claims Secured by Property. Model Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only entire property? portion you own? Approximate mileage: At least one of the debtors and another Other information Check if this is community property (see instructions)

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Case number (if known)

Last Name

Last Name

3.3. Make:		Who has an interest in the property? Check one. ☐ Debtor 1 only ☐ Debtor 2 only	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.		
	Year:	Debtor 1 and Debtor 2 only	Current value of the	Current value of the	
	Approximate mileage:	At least one of the debtors and another	entire property?	portion you own?	
	Other information:				
		☐ Check if this is community property (see instructions)	\$	\$	
3.4.	Make:	Who has an interest in the property? Check one.	Do not deduct secured cla		
	Model:	Debtor 1 only	Creditors Who Have Clain		
	Year:	Debtor 2 only	Current value of the	Current value of the	
	10 PE 1087 1087	Debtor 1 and Debtor 2 only	entire property?	portion you own?	
	Approximate mileage:	At least one of the debtors and another			
	Other information:	☐ Check if this is community property (see instructions)	\$	\$	
4.1.	Make: Model: Year: Other information:	Who has an interest in the property? Check one. ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Do not deduct secured cla the amount of any secure Creditors Who Have Clair Current value of the entire property?	d claims on Schedule D:	
		☐ Check if this is community property (see instructions)	\$	\$	
19020	L. L				
If wo					
If yo	u own or have more than one, list here:	18th a hear are interest in the property? Check are			
	u own or have more than one, list here: Make:	Who has an interest in the property? Check one.	Do not deduct secured cla		
		Debtor 1 only	Do not deduct secured cla the amount of any secure Creditors Who Have Clain	d claims on Schedule D:	
	Make:	Debtor 1 only Debtor 2 only	the amount of any secure	d claims on Schedule D: ns Secured by Property.	
	Make: Model: Year:	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	the amount of any secure Creditors Who Have Clair	d claims on Schedule D:	
	Make:	Debtor 1 only Debtor 2 only	the amount of any secure Creditors Who Have Clair Current value of the	d claims on Schedule D: ns Secured by Property. Current value of the	
	Make: Model: Year:	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	the amount of any secure Creditors Who Have Clair Current value of the	d claims on Schedule D: ns Secured by Property. Current value of the	
	Make: Model: Year:	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see	the amount of any secure Creditors Who Have Clair Current value of the entire property?	d claims on Schedule D: ns Secured by Property. Current value of the portion you own?	

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Debtor 1

MAYRA LOPEZ ACEVEDO

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Describe Your Personal and Household Items Part 3: Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware 100.00 Yes. Describe...... Bedroom furniture (20 years). 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ☐ No 200.00 Yes. Describe...... Two (2) tv from 21" inches. 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ☑ No 0.00 Yes, Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ☑ No ☐ Yes. Describe...... 0.00 10 Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment No No 0.00 ☐ Yes. Describe...... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories ☐ No 300.00 Yes. Describe..... Everyday clothes. 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver ☐ No 500.00 ☑ Yes. Describe...... Watch, earrings, rings and bracelets 13. Non-farm animals Examples: Dogs, cats, birds, horses No No Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list Yes. Give specific 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached 1,100.00 for Part 3. Write that number here

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Debtor 1

MAYRA LOPEZ ACEVEDO
First Name Middle Name La

Case number (if known)_

o you own or have any l	Current value of the portion you own? Do not deduct secured claim or exemptions.				
1220	nave in your wallet, in your hon	ne, in a safe deposit box, and on hand when you file y	your petition		
☑ No □ Yes		Ca	sh:	\$	
and other si	avings, or other financial accoเ milar institutions. If you have m	ints; certificates of deposit; shares in credit unions, bruitiple accounts with the same institution, list each.	rokerage houses,		
☑ Yes		Institution name:			
	17.1. Checking account:	Banco Popular de PR		\$	81.03
	17.2. Checking account:	Banco Santander		\$	0.00
	17.3. Savings account:			\$	
	17.4. Savings account:	8		\$	
	17.5. Certificates of deposit:			\$	
	17.6. Other financial account		h 1 8	\$	
	17.7. Other financial account			\$	
	17.8. Other financial account.			\$	
	17.9. Other financial account:			\$	
8 Bonds, mutual funds,	or publicly traded stocks				
☑ No		erage firms, money market accounts			
☐ Yes	Institution or issuer name:			15	
				\$	-
				\$ S	
	,		11.15	-	5.
Non-publicly traded s an LLC, partnership, a		rated and unincorporated businesses, including	an interest in		
☑ No	Name of entity:		of ownership:		
Yes. Give specific information about			% <u>%</u>	\$	
them	7		% %	\$	

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Case number (of known)

Debtor 1

MAYRA LOPEZ ACEVEDO
First Name Middle Name

		-
st Name	Middle Name	Last Nam

		ther negotiable and non-negotiable instruments	
Negotiable instruments	include personal che	ecks, cashiers' checks, promissory notes, and money orders. cannot transfer to someone by signing or delivering them.	
	ents are those you c	annot randor to company by againing to containing an	
☑ No	Issuer name:		
 Yes. Give specific information about 			\$
them			-
			\$
	8 		
Retirement or pension	accounts		
Examples: Interests in II	RA, ERISA, Keogh,	401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans	
☑ No			
Yes. List each	Type of account	Institution name:	
account separately.	Type of account.		
	401(k) or similar pla	n:	\$
	Pension plan:		\$
	IRA:		\$
	Retirement account		\$
	Keogh:	1 , 1	\$
		V.1 72-115	\$
	Additional account:		
	Additional account		\$
Your share of all unuser Examples: Agreements companies, or others	d deposits you have with landlords, prep	e made so that you may continue service or use from a company paid rent, public utilities (electric, gas, water), telecommunications	
☑ No			
☐ Yes		Institution name or individual:	
	Electric:		\$
	Gas:		\$
	Heating oil:		\$
	Security deposit on	rental unit:	\$
	Prepaid rent:		\$
	Telephone:		\$
	Water		\$
	Rented furniture:		\$
	Other:		\$
3. Annuities (A contract fo	or a periodic payme	nt of money to you, either for life or for a number of years)	
☑ No	and the second second to the desired		
☐ Yes	Issuer name and o	description:	
		ż	\$
			\$
			38

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Case number (if known) Document

MAYRA LOPEZ ACEVEDO

Middle Name

First Name

24. Interests in an education	ı IRA, in an account in	a qualified ABLE program, or under a qua	lified state tuition program.	
26 U.S.C. §§ 530(b)(1), 53	29A(b), and 529(b)(1).			
☑ No				
☐ Yes	Institution name a	and description. Separately file the records of a	any interests.11 U.S.C. § 521(c):
				\$
				\$
				\$
5. Trusts, equitable or futu exercisable for your ber	re interests in propert	ey (other than anything listed in line 1), and	rights or powers	
☑ No				
Yes. Give specific				
information about ther	n			\$
		s, and other intellectual property ceeds from royalties and licensing agreements	s	
2 No	produce, prod	and the state of t	_	
Yes. Give specific				
information about ther	n			\$
✓ No ☐ Yes. Give specific		cooperative association holdings, liquor license	es, professional licenses	c
information about ther	n			\$
Money or property owed to	you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
8. Tax refunds owed to you	1			
No No				
Yes. Give specific info about them, inclu			Federal:	\$
you already filed			State:	\$
and the tax years	i		Local:	\$
9. Family support				
	np sum alimony, spous	al support, child support, maintenance, divorce	e settlement, property settlement	ent
☑ No				
☐ Yes. Give specific info	rmation		Alimony:	e e
				\$
			Maintenance:	\$
			Support:	\$
			Divorce settlement:	\$
			Property settlement:	\$
Social Securit	, disability insurance pa	ayments, disability benefits, sick pay, vacation s you made to someone else	pay, workers' compensation,	
☑ No				
Yes. Give specific info	irmation			\$
				T

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Debtor 1 MAYRA LOPEZ ACEVEDO Document Page 15 of 54
Case number (if known)

	rests in insurance policies mples: Health, disability, or life insuran	ce; health savings account (HSA); credit, hom	eowner's, or renter's insurance	
Z	No			
	Yes. Name the insurance company of each policy and list its value	Company name:	Beneficiary:	Surrender or refund value:
	, , , , , , , , , , , , , , , , , , , ,			\$
				\$
		W		¢
				\$
lf yo prop	perty because someone has died.	from someone who has died xpect proceeds from a life insurance policy, or	are currently entitled to receive	
2				
	Yes. Give specific information			\$
Exa	mples: Accidents, employment dispute	not you have filed a lawsuit or made a der s, insurance claims, or rights to sue	nand for payment	
				\$
	et off claims	ns of every nature, including counterclaims	of the debtor and rights	
	Yes. Describe each claim			
	res. Describe each dain.			\$
35. Any	financial assets you did not already	list		
Ø	No			
	Yes. Give specific information			e
		es from Part 4, including any entries for page		s 81.03
101	art 4. Write that humber here		······································	
	Describe Son Business	Balatad Businesty Van Orom av Han		sal sotate in Bort 1
Part 5	Describe Any Business-	Related Property You Own or Hav	e an interest in. List any r	ear estate in Part 1.
7. Do y	ou own or have any legal or equital	ole interest in any business-related propert	y?	
	No. Go to Part 6.			
	Yes. Go to line 38.			
				Current value of the portion you own? Do not deduct secured claims or exemptions.
120		9 9 9		or exemptions.
	ounts receivable or commissions yo	ou already earned		
Δ				
Ш	Yes. Describe			\$
		P		J*
	ce equipment, furnishings, and sup		anhonee daeke ohgire alaatrania davisaa	
		e, modems, printers, copiers, fax machines, rugs. tel-	spriories, desks, criairs, electroriic devices	
	No Yes. Describe			
	res. Describe			\$

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Debtor 1 MAYRA L	OPEZ ACEVEDO Case number (if know	vn)	
First Name	Middle Name Last Name		
Machinery, fixtures,	equipment, supplies you use in business, and tools of your trade		
☑ No		4-14	
Yes. Describe			\$
Inventory No			
Yes, Describe			\$
Tes. Describe			
and the state of			
2 Interests in partners	nips or joint ventures		
☑ No			
Yes. Describe	Name of entity:	% of ownership:	
	-	%	\$
		%	\$
		%	\$
No No	ng lists, or other compilations		
	s include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?	,	
□ No	, motato potocitary taonimuso mentanon (ao estimento mentano esta esta esta esta esta esta esta esta		
Yes. Des	cribe		
- 100, 500	OTTO STATES		\$
	d property you did not already list		
M No			
Yes. Give specific information			\$
miorinauori			\$
			\$
			250
			\$
		1240-125-129	\$
		401-57-5	\$
	of all of your entries from Part 5, including any entries for pages you have attac	ahad	0.00
	number here		\$0.00
for rare of write that			
art 6: Describe	Any Farm- and Commercial Fishing-Related Property You Own or Have	an Interest	ln.
	or have an interest in farmland, list it in Part 1.	an increst	
5. Do you own or have	any legal or equitable interest in any farm- or commercial fishing-related proper	rty?	
No. Go to Part 7.			
Yes. Go to line 47			
			Current value of the
			portion you own? Do not deduct secured claims
			or exemptions.
. Farm animals			
	poultry, farm-raised fish		
☑ No			
☐ Yes			
			s

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Debtor 1 WATTA LOT LZ ACL VLDO		- (Case number (if known)	SCIENCE	DAY 7
First Name Middle Name Last Name			PLACE, P.O	WIWG	IAN X
48 Crops—either growing or harvested					
☑ No			est Common goldsstud tes	Thomas	
☐ Yes. Give specific information					
				\$	
49 Farm and fishing equipment, implements, machinery, fixture ✓ No	res, and to	ools of trade			
☐ Yes					
				\$	
50. Farm and fishing supplies, chemicals, and feed			ma manthagasan		
☑ No					
☐ Yes					
				\$	
51 Any farm- and commercial fishing-related property you did	l not alread	dy list			
☑ No					
Yes. Give specific information				\$	
50 Add the deller value of all of your autities from Bort C include					0.00
52. Add the dollar value of all of your entries from Part 6, inclu for Part 6. Write that number here				\$	0.00
Examples: Season tickets, country club membership ☐ No ☑ Yes, Give specific Apartment Paseo Degetau, Cag	guas, PR	(Foreclosure))	\$_	104,229.00
information				\$_	
				\$_	
	1020 10 12	20	•		104,229.00
54. Add the dollar value of all of your entries from Part 7. Write	that numi	ber here	•	\$_	104,220.00
Part 8: List the Totals of Each Part of this Form	m				
55 Part 1: Total real estate, line 2			→	\$	32,333.33
56. Part 2: Total vehicles, line 5	\$	8,675.00			
57 Part 3: Total personal and household items, line 15	\$	1,100.00			
58. Part 4: Total financial assets, line 36	\$	81.03			
59 Part 5: Total business-related property, line 45	\$	0.00			
	φ	0.00			
60. Part 6: Total farm- and fishing-related property, line 52	Φ	104,229.00			
61. Part 7: Total other property not listed, line 54	+\$				
62 Total personal property. Add lines 56 through 61	\$	114,085.03	Copy personal property total ->	+\$	114,085.03
63 Total of all property on Schedule A/R. Add line 55 + line 62					146,418.36

63 Total of all property on Schedule A/B. Add line 55 + line 62.

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Fill in this information to identify your	case:		
Debtor 1 MAYRA LOPEZ ACE	VEDO Iddie Name Last Name		
Debtor 2	tiddle Namë Last Name		
(opouse, it ming) I issues			
United States Bankruptcy Court for the: District	Ct of Fuerto Nico		☐ Check if this is an
Case number(If known)			amended filing
Official Form 106C			
	Dronorty Vou	Claim as Evemnt	04/40
Schedule C: The			The second secon
Be as complete and accurate as possible. Using the property you listed on Schedule space is needed, fill out and attach to this your name and case number (if known).	A/B: Property (Official Form 106A page as many copies of Part 2: A	A/B) as your source, list the property that y dditional Page as necessary. On the top of	you claim as exempt. If more of any additional pages, write
For each item of property you claim as specific dollar amount as exempt. Alter of any applicable statutory limit. Some retirement funds—may be unlimited in limits the exemption to a particular doll would be limited to the applicable statu	matively, you may claim the full exemptions—such as those for dollar amount. However, if you lar amount and the value of the	fair market value of the property being health aids, rights to receive certain be claim an exemption of 100% of fair ma	g exempted up to the amount enefits, and tax-exempt rket value under a law that
would be minted to the approximation			
Part 1: Identify the Property Yo	ou Claim as Exempt		
Which set of exemptions are you or	laiming? Check one only, even in	your spouse is filing with you.	
☐ You are claiming state and feder			
You are claiming federal exemption	ons. 11 U.S.C. § 522(b)(2)		
2. For any property you list on Scheo	fule A/B that you claim as exem	pt, fill in the information below.	
Brief description of the property an Schedule A/B that lists this propert		Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption.	
Brief HOUSE AND L	OT \$ 13,333.33	☑ \$ 13,333.33	522(d)(1)
Line from		☐ 100% of fair market value, up to	
Schedule A/B: 1.1		any applicable statutory limit	Management of the second of th
Brief	\$	□ \$	
description: ————————————————————————————————————	Ψ	☐ 100% of fair market value, up to	
Schedule A/B:		any applicable statutory limit	
Brief	\$	□ \$	
description: Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
2 American alainaine a hammada at ann	amotion of more than \$460 2750		
 Are you claiming a homestead exe (Subject to adjustment on 4/01/19 ar 		es filed on or after the date of adjustment.)
☑ No			
Yes. Did you acquire the propert	y covered by the exemption within	1,215 days before you filed this case?	
□ No			

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Debtor 1

MAYRA LOPEZ ACEVEDO

Case number (if known)_

Part 2: Additional Page

Brief description of the property and line on Schedule A/B that lists this property		Current value of the portion you own		Amount of the exemption you claim	Specific laws that allow exemption
		Copy th Schedu	e vaiue from le A/B	Check only one box for each exemption	
Brief description:	KIA	\$	8,675.00	∡ \$8,675.00	522(d)(2)(5)
Line from Schedule A/B	3.1			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	Bedroom furniture	\$	100.00		522(d)(3)
Line from Schedule A/B:	6			any applicable statutory limit	(
Brief description:	TV's	\$	200.00	☑ \$200.00 ☐ 100% of fair market value, up to	522(d)(3)
Line from Schedule A/B:	7			any applicable statutory limit	7
Brief description:	Clothes	\$	300.00	☑ \$300.00	522(d)(3)
Line from Schedule A/B:	11			any applicable statutory limit	1,
Brief description:	Jewelry	\$	500.00	✓ \$ 500.00 □ 100% of fair market value, up to	522(d)(4)
Line from Schedule A/B	12			any applicable statutory limit	
Brief description:		\$	- process	\$ \$ 100% of fair market value, up to	
Line from Schedule A/B:				any applicable statutory limit	
Brief description:		\$		\$ \$ 100% of fair market value, up to	
Line from Schedule A/B:	-			any applicable statutory limit	
Brief description:		\$	<u> </u>	□ \$ □ 100% of fair market value, up to	
Line from Schedule A/B:				any applicable statutory limit	
Brief description:		\$			
Line from Schedule A/B:				☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$		\$ \$ 100% of fair market value, up to	
Line from Schedule A/B:				any applicable statutory limit	
Brief description:		\$		□ \$ □ 100% of fair market value, up to	
Line from Schedule A/B:				any applicable statutory limit	
Brief description:		\$		□ \$	
Line from Schedule A/B:				☐ 100% of fair market value, up to any applicable statutory limit	

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Fill in this information to identify your case				
Debtor 1 MAYRA LOPEZ ACEVED First Name Middle N				
Debtor 2 (Spouse, if filing) First Name Middle N	ame Last Name			
United States Bankruptcy Court for the: District of	Puerto Rico			
Case number				
(If known)			_ 0.10011	if this is an ed filing
Official Form 106D				
Schedule D: Creditor	s Who Have Claims Secure	ed by Prop	erty	12/15
information. If more space is needed, copy additional pages, write your name and case		ually responsible fo and attach it to this	or supplying correct form. On the top of	t Fany
Do any creditors have claims secured by Ohard this have and submit this form	y your property? n to the court with your other schedules. You have noth	na else to report on t	his form.	
✓ No. Check this box and submit this form ✓ Yes. Fill in all of the information below.	in to the court with your other schedules. For have noth	ng else to report on t	101111	
Part 1: List All Secured Claims		2.1	Caluma B	Column C
for each claim. If more than one creditor h	nore than one secured claim, list the creditor separately as a particular claim, list the other creditors in Part 2. nabetical order according to the creditor's name.	Column A Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion
2.1 POPULAR MORTGAGE	Describe the property that secures the claim:	\$104,229.00	\$	\$ 104,229.
Creditor's Name				
PO BOX 70127 Number Street				
	As of the date you file, the claim is: Check all that apply			
SAN JUAN PR 00936	Contingent Unliquidated			
City State ZIP Code	☑ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or secured			
Debtor 2 only	car loan) Statutory lien (such as tax lien, mechanic's lien)			
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
	Other (including a right to offset)	-		
 Check if this claim relates to a community debt 	Joseph (1996) 1 Tenny dis			
Date debt was incurred	Last 4 digits of account number 5 7 6 1		ANNALO BARANTANA ANTANA	
2.2 CAPITAL MGMT MAINTENANC	Describe the property that secures the claim:	\$1,160.76	\$	\$_1,160.7
Creditor's Name				
PO BOX 864964 Number Street	-			
11000	As of the date you file, the claim is: Check all that apply			
	Contingent			
ORLANDO FL 32886 City State ZIP Code	□ Unliquidated			
	Disputed			
Who owes the debt? Check one	Nature of lien. Check all that apply.			
Debtor 1 only Debtor 2 only	An agreement you made (such as mortgage or secured car loan)			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	Judgment lien from a lawsuit			
Check if this claim relates to a community debt	Other (including a right to offset) Last 4 digits of account number 4 9 6 4	_		
Date debt was incurred	Column A on this page Write that number here:	k	1	

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Case number (if known)_

Debtor 1

MAYRA LOPEZ ACEVEDO

Additional Page Part 1: After listing any entries of by 2.4, and so forth.	n this page, number them beginning with 2.3, followed	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
VACATION VILLAGE	Describe the property that secures the claim:	\$	\$	\$ 967.00
Creditor's Name PO BOX 405947 Number Street				
	As of the date you file, the claim is: Check all that apply. 3335 Code Unliquidated Disputed			
Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and anoth Check if this claim relates to a community debt	Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statistical lien (such as tax lien, mechanic's lien) Indigment lien from a lawsuit Other (including a right to offset)	-		
Date debt was incurred	Last 4 digits of account number 7 5 4 9			
Creditor's Name Number Street	Describe the property that secures the claim:	\$	\$	\$
number Sueet	As of the date you file, the claim is: Check all that apply. ———————————————————————————————————	18		
D2150 07777 0	Code Unliquidated Disputed			
Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and anoth Check if this claim relates to a community debt	Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset)	-		
Date debt was incurred	Last 4 digits of account number			
Creditor's Name	Describe the property that secures the claim:	\$	\$.\$
Number Street				
City State ZIP	As of the date you file, the claim is: Check all that apply. Code Unliquidated Disputed			
Who owes the debt? Check one. Debtor 1 only	Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured)			
□ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and anoth □ Check if this claim relates to a community debt	car loan) Statutory lien (such as tax lien, mechanic's lien)	-		
Date debt was incurred	Last 4 digits of account number			
Add the dollar value of your	entries in Column A on this page. Write that number here:	\$		
If this is the last page of you Write that number here:	ir form, add the dollar value totals from all pages.	\$		

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Debtor 1

MAYRA LOPEZ ACEVEDO

Case number (if known)	
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take this page only if you have others to be notified about your harkmosty for a debt that you already listed in Part 1. For example, a collection you are passed by the collection and	Pa	rt 2: L	ist Others to Be Notific	ed for a Debt	That You Already	Listed
Name Number Street City State ZIP Code On which line in Part 1 did you enter the creditor? Last 4 digits of account number	ag	ency is tryir	ng to collect from you for a control to the than one creditor for any on	debt you owe to of the debts that	someone else, list the you listed in Part 1, lis	creditor in Part 1, and then list the collection agency here. Similarly, if
Name Number Street City State ZIP Code On which line in Part 1 did you enter the creditor? Last 4 digits of account number City State ZIP Code On which line in Part 1 did you enter the creditor? Last 4 digits of account number City State ZIP Code On which line in Part 1 did you enter the creditor? Last 4 digits of account number City State ZIP Code On which line in Part 1 did you enter the creditor? Last 4 digits of account number City State ZIP Code On which line in Part 1 did you enter the creditor? Last 4 digits of account number City State ZIP Code On which line in Part 1 did you enter the creditor? Last 4 digits of account number City State ZIP Code On which line in Part 1 did you enter the creditor? Last 4 digits of account number						On which line in Part 1 did you enter the creditor?
On which line in Part 1 did you enter the creditor? Last 4 digits of account number Last 4 digits of account number City State ZIP Code On which line in Part 1 did you enter the creditor? Last 4 digits of account number City State ZIP Code On which line in Part 1 did you enter the creditor? Last 4 digits of account number 5 7 6 1 Number Street On which line in Part 1 did you enter the creditor? Last 4 digits of account number 5 7 6 1 Name Number Street On which line in Part 1 did you enter the creditor? Last 4 digits of account number		Name				Last 4 digits of account number
On which line in Part 1 did you enter the creditor? Last 4 digits of account number Last 4 digits of account number City State ZIP Code On which line in Part 1 did you enter the creditor? Last 4 digits of account number City State ZIP Code On which line in Part 1 did you enter the creditor? Last 4 digits of account number 5 7 6 1 Number Street On which line in Part 1 did you enter the creditor? Last 4 digits of account number 5 7 6 1 Name Number Street On which line in Part 1 did you enter the creditor? Last 4 digits of account number						
Name Number Street City State ZIP Code On which line in Part 1 did you enter the creditor?		Number	Street			
Name Number Street City State ZIP Code On which line in Part 1 did you enter the creditor?						
Number Street City State ZIP Code On which line in Part 1 did you enter the creditor? Last 4 digits of account number		City		State	ZIP Code	
City State ZIP Code Name Last 4 digits of account number Street Last 4 digits of account number Street City State ZIP Code City City State ZIP Code City City State ZIP Code City Ci	П					On which line in Part 1 did you enter the creditor?
On which line in Part 1 did you enter the creditor? Last 4 digits of account number Number Street On which line in Part 1 did you enter the creditor? Last 4 digits of account number 5 7 6 1 Name Last 4 digits of account number 5 7 6 1 Number Street On which line in Part 1 did you enter the creditor? Last 4 digits of account number 5 7 6 1 Name Number Street On which line in Part 1 did you enter the creditor? Last 4 digits of account number — — — — — — — — — — — — — — — — — — —		Name				Last 4 digits of account number
On which line in Part 1 did you enter the creditor? Last 4 digits of account number Number Street On which line in Part 1 did you enter the creditor? Last 4 digits of account number 5 7 6 1 Name Last 4 digits of account number 5 7 6 1 Number Street On which line in Part 1 did you enter the creditor? Last 4 digits of account number 5 7 6 1 Name Number Street On which line in Part 1 did you enter the creditor? Last 4 digits of account number — — — — — — — — — — — — — — — — — — —						
Name Number Street City State ZIP Code On which line in Part 1 did you enter the creditor?		Number	Street			
Name Number Street City State ZIP Code On which line in Part 1 did you enter the creditor?			<u>a fize</u> Pille of Carameters			
Name Number Street City State ZIP Code On which line in Part 1 did you enter the creditor? Last 4 digits of account number _5 7 6 1 Name City State ZIP Code On which line in Part 1 did you enter the creditor? Last 4 digits of account number _5 7 6 1 On which line in Part 1 did you enter the creditor? Last 4 digits of account number Name Number Street City State ZIP Code On which line in Part 1 did you enter the creditor? Last 4 digits of account number		City		State	ZIP Code	
Number Street City State ZIP Code On which line in Part 1 did you enter the creditor? Last 4 digits of account number 5 7 6 1 Number Street City State ZIP Code On which line in Part 1 did you enter the creditor? Last 4 digits of account number Name Number Street City State ZIP Code On which line in Part 1 did you enter the creditor? Last 4 digits of account number Last 4 digits of account number Number Street Name Number Street						On which line in Part 1 did you enter the creditor?
City State ZIP Code On which line in Part 1 did you enter the creditor? Last 4 digits of account number 5 7 6 1 Name City State ZIP Code On which line in Part 1 did you enter the creditor? Last 4 digits of account number On which line in Part 1 did you enter the creditor? Last 4 digits of account number Number Street On which line in Part 1 did you enter the creditor? Last 4 digits of account number Last 4 digits of account number	_	Name				Last 4 digits of account number
City State ZIP Code On which line in Part 1 did you enter the creditor? Last 4 digits of account number 5 7 6 1 Name City State ZIP Code On which line in Part 1 did you enter the creditor? Last 4 digits of account number On which line in Part 1 did you enter the creditor? Last 4 digits of account number Number Street On which line in Part 1 did you enter the creditor? Last 4 digits of account number Last 4 digits of account number		Number	Ctroot			
Name Number Street City State ZIP Code On which line in Part 1 did you enter the creditor? Last 4 digits of account number 5 7 6 1 On which line in Part 1 did you enter the creditor? Last 4 digits of account number Name Number Street On which line in Part 1 did you enter the creditor? Last 4 digits of account number On which line in Part 1 did you enter the creditor? Last 4 digits of account number Last 4 digits of account number		Number	oneer			
Name Number Street City State ZIP Code On which line in Part 1 did you enter the creditor? Last 4 digits of account number 5 7 6 1 On which line in Part 1 did you enter the creditor? Last 4 digits of account number Name Number Street On which line in Part 1 did you enter the creditor? Last 4 digits of account number On which line in Part 1 did you enter the creditor? Last 4 digits of account number Last 4 digits of account number						
Name Last 4 digits of account number 5 7 6 1 Number Street City State ZIP Code On which line in Part 1 did you enter the creditor?		City		State	ZIP Code	
Number Street City State ZIP Code On which line in Part 1 did you enter the creditor? Last 4 digits of account number City State ZIP Code On which line in Part 1 did you enter the creditor? Last 4 digits of account number Last 4 digits of account number Last 4 digits of account number						
City State ZIP Code On which line in Part 1 did you enter the creditor? Last 4 digits of account number City State ZIP Code On which line in Part 1 did you enter the creditor? Annual City State ZIP Code On which line in Part 1 did you enter the creditor? Last 4 digits of account number		Name				Last 4 digits of account number 5 7 6 1
City State ZIP Code On which line in Part 1 did you enter the creditor? Last 4 digits of account number City State ZIP Code On which line in Part 1 did you enter the creditor? Annual City State ZIP Code On which line in Part 1 did you enter the creditor? Last 4 digits of account number		Number	Street			
Name Number Street City State ZIP Code On which line in Part 1 did you enter the creditor? Last 4 digits of account number On which line in Part 1 did you enter the creditor? Last 4 digits of account number		Trumbo	0,100.			
Name Number Street City State ZIP Code On which line in Part 1 did you enter the creditor? Last 4 digits of account number On which line in Part 1 did you enter the creditor? Last 4 digits of account number		8				
Number Street City State ZIP Code On which line in Part 1 did you enter the creditor? Last 4 digits of account number Last 4 digits of account number		City		State	ZIP Code	
Number Street City State ZIP Code On which line in Part 1 did you enter the creditor? Name Last 4 digits of account number						On which line in Part 1 did you enter the creditor?
City State ZIP Code On which line in Part 1 did you enter the creditor? Name Last 4 digits of account number		Name				Last 4 digits of account number
Name Number Street On which line in Part 1 did you enter the creditor? Last 4 digits of account number		Number	Street			
Name Number Street On which line in Part 1 did you enter the creditor? Last 4 digits of account number						
Name Number Street On which line in Part 1 did you enter the creditor? Last 4 digits of account number			27			
Name Last 4 digits of account number Number Street		City		State	ZIP Code	
Number Street						(1) 10 10 10 10 10 10 10 10 10 10 10 10 10
		Name				Last 4 digits of account number
City State 7IP Code		Number	Street		78-32	
City State 7IP Code						50
1.014 A.H		City		State	ZIP Code	-

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· Fill in this i	nformation to identify	y your case:					
Debtor 1	MAYRA LOPEZ			_			
V-22 - G-12 F-1 - A-2-A-1-1-1-2-2-2-2-2-2-2-2-2-2-2-2-2-2-	First Name	Middle Name	Last Name				
Debtor 2 (Spouse, if filing	g) First Name	Middle Name	Last Name	-			
United States	Bankruptcy Court for the	District of Puerto	Rico				
Office Otales	Damagney Court of the					☐ Chec	k if this is an
Case number (If known)	r					amer	nded filing
Off: -: -1	E 106E/E	-					
	Form 106E/F			70 7000 0			
Sched	ule E/F: Cr	editors W	ho Have Unse	cured Clain	15		12/15
List the othe A/B: Propert creditors wit needed, cop	er party to any execut ty (Official Form 106A th partially secured cl	ory contracts or un VB) and on Schedulaims that are liste fill it out, number t	1 for creditors with PRIORIT nexpired leases that could reule G: Executory Contracts ad in Schedule D: Creditors Whe entries in the boxes on the mber (if known).	esult in a claim. Also lis nd Unexpired Leases (C Vho Have Claims Secur	st executory co Official Form 10 ed by Property	ontracts on S 06G). Do not . If more spa	chedule include any ce is
Part 1: L	ist All of Your PRI	ORITY Unsecure	ed Claims				
No. G Yes. List all o each clair nonpriorit unsecure	m listed, identify what t ty amounts. As much a ed claims, fill out the Co	ured claims. If a creatype of claim it is. If a spossible, list the continuation Page of	editor has more than one priori a claim has both priority and no claims in alphabetical order acc Part 1. If more than one credito	onpriority amounts, list th cording to the creditor's n or holds a particular claim	at claim here ar ame. If you have	nd show both e more than to	priority and wo priority
(For an e	explanation of each type	e of claim, see the i	nstructions for this form in the i	nstruction booklet.)	Total claim	Priority amount	Nonpriority amount
1						amount	amount
2.1			Last 4 digits of account nun	nber	\$	\$	_ \$
Priority Cr	reditor's Name		When was the debt incurred	12			
Number	Street		When was the dept mounted				
903100078.50			As of the date you file, the o	laim is: Check all that apply	<i>f</i> .		
			☐ Contingent				
City	Sta		☐ Unliquidated				
and the same of th	curred the debt? Check tor 1 only	one.	☐ Disputed				
	tor 2 only		Type of PRIORITY unsecu	red claim:			
	tor 1 and Debtor 2 only		Domestic support obligation				
	ast one of the debtors and	d another	☐ Taxes and certain other det				
☐ Che	ck if this claim is for a	community debt	Claims for death or personal				
Is the c	laim subject to offset?	Ē	intoxicated	A 30 - 18			
☐ No			Other. Specify		=		
☐ Yes						and the second s	
2.2			Last 4 digits of account nun	nber	\$	\$	\$
Priority Cr	reditor's Name		When was the debt incurred				
Number	Street						
200000000000000000000000000000000000000	200104004		As of the date you file, the o	claim is: Check all that apply	у		
			☐ Contingent				
City	Sta	ate ZIP Code	☐ Unliquidated				
Who in	curred the debt? Check	cone.	☐ Disputed				
	tor 1 only		Type of PRIORITY unsecu	red claim:			
	tor 2 only		☐ Domestic support obligation				
	tor 1 and Debtor 2 only		☐ Taxes and certain other del				
☐ At le	east one of the debtors and	d another	Claims for death or persons				
☐ Che	eck if this claim is for a	community debt	intoxicated	a injury writte you were			
Is the c	laim subject to offset?		Other Specify		_		
- res							

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Debtor 1

Pronty Creditor's Name Number Street City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes Pronty Creditor's Name Number Street City State ZIP Code Who incurred the debt? Check one. Debtor 1 only	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were	\$	\$	\$
Number Street City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes Priority Creditor's Name Number Street City State ZIP Code Who incurred the debt? Check one. Debtor 1 only	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were			
Number Street City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes Priority Creditor's Name Number Street City State ZIP Code Who incurred the debt? Check one. Debtor 1 only	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were			
City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes Pronty Creditor's Name Number Street City State ZIP Code Who incurred the debt? Check one. Debtor 1 only	□ Contingent □ Unliquidated □ Disputed Type of PRIORITY unsecured claim: □ Domestic support obligations □ Taxes and certain other debts you owe the government □ Claims for death or personal injury while you were			
Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes Priority Creditor's Name Number Street City State ZIP Code Who incurred the debt? Check one. Debtor 1 only	□ Unliquidated □ Disputed Type of PRIORITY unsecured claim: □ Domestic support obligations □ Taxes and certain other debts you owe the government □ Claims for death or personal injury while you were			
Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes Pronty Creditor's Name Number Street City State ZIP Code Who incurred the debt? Check one. Debtor 1 only	Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were			
□ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Yes Priority Creditor's Name Number Street □ City State ZIP Code □ Debtor 1 only	Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were			
□ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Yes Pronty Creditor's Name Number Street City State ZIP Code Who incurred the debt? Check one. □ Debtor 1 only	Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were			
□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Yes Priority Creditor's Name Number Street City State ZIP Code Who incurred the debt? Check one. □ Debtor 1 only	Taxes and certain other debts you owe the government Claims for death or personal injury while you were			
Check if this claim is for a community debt Is the claim subject to offset? No Yes Pronty Creditor's Name Number Street City State ZIP Code Who incurred the debt? Check one.				
Is the claim subject to offset? No Yes Priority Creditor's Name Number Street City State ZIP Code Who incurred the debt? Check one.				
Is the claim subject to offset? No Yes Priority Creditor's Name Number Street City State ZIP Code Who incurred the debt? Check one.	intoxicated Other. Specify			
Priority Creditor's Name Number Street City State ZIP Code Who incurred the debt? Check one.				
Priority Creditor's Name Number Street City State ZIP Code Who incurred the debt? Check one.				
Number Street City State ZIP Code Who incurred the debt? Check one.		000000		
Number Street City State ZIP Code Who incurred the debt? Check one.	Last 4 digits of account number	\$	_ \$	\$
Number Street City State ZIP Code Who incurred the debt? Check one.	When was the debt incurred?			
City State ZIP Code Who incurred the debt? Check one.	year or character year season and constructed and a state of the construction of the c			
City State ZIP Code Who incurred the debt? Check one. Debtor 1 only	As of the date you file, the claim is: Check all that apply.			
Who incurred the debt? Check one. Debtor 1 only	☐ Contingent			
Who incurred the debt? Check one. Debtor 1 only	Unliquidated			
Debtor 1 only	☐ Disputed			
D	Type of PRIORITY unsecured claim:			
Debtor 2 only	☐ Domestic support obligations			
	Taxes and certain other debts you owe the government			
	Claims for death or personal injury while you were			
☐ Check if this claim is for a community debt	intoxicated Other Specify			
Is the claim subject to offset?	Other Specify			
No				
☐ Yes				
	Last 4 digits of account number	\$	\$	_ \$
Priority Creditor's Name				
Number Street	When was the debt incurred?			
	As of the date you file, the claim is: Check all that apply			
USSA	Contingent			
City State ZIP Code	Unliquidated Disputed			
Who incurred the debt? Check one.	- Disputed			
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only	☐ Domestic support obligations			
Debtor 1 and Debtor 2 only	Taxes and certain other debts you owe the government			
At least one of the debtors and another	☐ Claims for death or personal injury while you were			
☐ Check if this claim is for a community debt	intoxicated			
Is the claim subject to offset?	Other Specify			
□ No				

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MAYRA LOPEZ ACEVEDO

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)el		

Debtor	First Name Middle Name	Last Nam	ne.	Case number (if known)			
Part	2: List All of Your NONPRIC	RITY Un	secured Claims				
	o any creditors have nonpriority u						
	No. You have nothing to report in to Yes	his part. Su	ubmit this form to the	e court with your other schedules.			
no in	appriority unsecured claim, list the cr	editor sepa editor holds	rately for each claim	order of the creditor who holds each claim. If a creditor has n. For each claim listed, identify what type of claim it is. Do not list the other creditors in Part 3.If you have more than three no	t list cla inpriori	aims already ity unsecured	
_					Tot	al claim	
-	ASOCIACIÓN DE RESIDEN	TES PAS	SEO DEGETAU	Last 4 digits of account number 0 2 0 6	e	1,624.10	
	Nonpriority Creditor's Name			When was the debt incurred?	Ф	.,,==	
	AVE. DEGETAU FINAL OES Number Street	TE		When was the dest mounted.			
	CAGUAS	PR	00727				
	City	State	ZIP Code	As of the date you file, the claim is: Check all that apply.			
				☐ Contingent			
	Who incurred the debt? Check one.			☑ Unliquidated			
	Debtor 1 only			☐ Disputed			
	Debtor 2 only			T. CHONDRIODITY			
	Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:			
	At least one of the debtors and another			Student loans			
	Check if this claim is for a comm	unity debt		 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 			
	Is the claim subject to offset?			Debts to pension or profit-sharing plans, and other similar debts			
	☑ No			✓ Other Specify MAINTENANCE			
	Yes						
.2	BANCO POPULAR DE PUE	RTO RIC	0	Last 4 digits of account number 0 7 6 5	\$	780.00	
	Nonpriority Creditor's Name			When was the debt incurred?			
	PO BOX 362708						
	Number Street SAN JUAN	PR	00936	As of the date you file, the claim is: Check all that apply.			
	City	State	ZIP Code				
	TO COMPANY OF THE CONTRACT OF			☐ Contingent ☐ Unliquidated			
	Who incurred the debt? Check one.			Disputed			
	Debtor 1 only Debtor 2 only						
	Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:			
	At least one of the debtors and anoth	er		☐ Student loans			
	_			☐ Obligations arising out of a separation agreement or divorce			
	☐ Check if this claim is for a comm	unity debt		that you did not report as priority claims	65		
	Is the claim subject to offset?			 ☑ Debts to pension or profit-sharing plans, and other similar debt ☑ Other. Specify _CREDIT CARD 	5		
	☑ No ☑ Yes			offer. Specify Street 1 Street			
-	Tes .						
	BANCO POPULAR DE PUE Nonpriority Creditor's Name	RTO RIC	0	Last 4 digits of account number 8 4 0 8	\$	13,806.84	
	PO BOX 363228			When was the debt incurred?	85-22-2		
	Number Street						
	SAN JUAN	PR	00936	- As of the date you file, the claim is: Check all that apply.			
	City	State	ZIP Code				
	Who incurred the debt? Check one.			☐ Contingent ☐ Unliquidated			

☐ Disputed

☐ Student loans

Type of NONPRIORITY unsecured claim:

that you did not report as priority claims

Other. Specify CREDIT CARD

Obligations arising out of a separation agreement or divorce

 $\hfill \Box$ Debts to pension or profit-sharing plans, and other similar debts

☑ No

☐ Yes

☑ Debtor 1 only

Debtor 2 only

Debtor 1 and Debtor 2 only

Is the claim subject to offset?

At least one of the debtors and another

Check if this claim is for a community debt

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Pai	rt 2: List All of Your NONPRIORITY	Jnsecured	Claims	
	Do any creditors have nonpriority unsecure			
	 No. You have nothing to report in this part. ✓ Yes 	Submit this f	form to the court with your other schedules.	
	nonpriority unsecured claim, list the cred for se	parately for e	nabetical order of the creditor who holds each claim. If a creditor has meach claim. For each claim listed, identify what type of claim it is. Do not list lar claim, list the other creditors in Part 3.If you have more than three nonp	st claims aiready
	i			Total claim
1	BANCO SANTANDER Nonprority Creditor's Name		Last 4 digits of account number 7 5 9 2	21,807.27
	PO BOX 362589		When was the debt incurred?	
	Number Street SAN JUAN PR	0093	26	
	SAN JUAN PR City State	ZIP Code		
			☐ Contingent	
	Who incurred the debt? Check one.		☑ Unliquidated	
	Debtor 1 only		Disputed	
	Debtor 2 only Debtor 1 and Debtor 2 only		Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another		☐ Student loans	
	☐ Check if this claim is for a community de	bt	Obligations arising out of a separation agreement or divorce	
	Is the claim subject to offset?		that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	☑ No		Other. Specify PERSONAL LOAN	
	☐ Yes			
2	COMENITY-PACIFIC SUNWEAR		Last 4 digits of account number 0 3 4 3 s	300.25
	Nonpriority Creditor's Name		When was the debt incurred?	
	PO BOX 659705			
	Number Street SAN ANTONIO TX	7826	As of the date you file, the claim is: Check all that apply.	
	City State	ZIP Code		
	Who incurred the debt? Check one		☐ Unliquidated	
	Debtor 1 only		Disputed	
	Debtor 2 only		T (NONDRIORITY d alains	
	Debtor 1 and Debtor 2 only		Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another		 Student loans Obligations arising out of a separation agreement or divorce 	
	☐ Check if this claim is for a community de	bt	that you did not report as priority claims	
	Is the claim subject to offset?		Debts to pension or profit-sharing plans, and other similar debts	
	☑ No		Other. Specify CREDIT CARD	
	Yes			
3	VACATION VILLAGE AT PARKWA	Υ	Last 4 digits of account number 7 5 4 9	837.00
	Nonpriority Creditor's Name		When was the debt incurred?	
	PO BOX 350547 Number Street			
	FOURT LAUDERDALE FL	3333	As of the date you file, the claim is: Check all that apply	
	City State	ZIP Code	© Contingent	
	Who incurred the debt? Check one.		☑ Unliquidated	
	Debtor 1 only		☐ Disputed	
	Debtor 2 only Debtor 1 and Debtor 2 only		To A MONDPIORITY	
	☐ At least one of the debtors and another		Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community de	bt	 Student loans Obligations arising out of a separation agreement or divorce 	
	Service de China de Caractera d		that you did not report as priority claims	
	Is the claim subject to offset? ✓ No		Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes		Other. Specify ANNUAL MAINTENANCE	

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Debtor 1

	冕	_	2
Lis		8.5	2:

Your NONPRIORITY Unsecured Claims - Continuation Page

er listing any entries on this p	age, number the	m beginning wit	h 4.4, followed by 4.5, and so forth.	Total clain
TJX REWARDS/SYNCE	3		Last 4 digits of account number 0 0 4 8	\$ 2,333.0
Nonpriority Creditor's Name PO BOX 530949			When was the debt incurred?	
Number Street ATLANTA	GA	30353	As of the date you file, the claim is: Check all that apply.	
City Who incurred the debt? Check	State	ZIP Code	☐ Contingent ☐ Unliquidated ☐ Disputed	
Debtor 1 only Debtor 2 only			Type of NONPRIORITY unsecured claim:	
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and	another		 Student loans Obligations ansing out of a separation agreement or divorce that 	
☐ Check if this claim is for a community debt Is the claim subject to offset? ✓ No ☐ Yes			you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify CREDIT CARD	
			Last 4 digits of account number	\$
Nonpriority Creditor's Name			When was the debt incurred?	
Number Street	360		As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Contingent	
Who incurred the debt? Check ☐ Debtor 1 only	one.		☐ Unliquidated ☐ Disputed	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and	another		☐ Student loans	
☐ Check if this claim is for a			 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	community debt		Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset? ☐ No ☐ Yes			Other Specify	
			Last 4 digits of account number	\$
Nonpriority Creditor's Name			When was the debt incurred?	
Number Street			As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	□ Contingent	
Who incurred the debt? Check of	one		Unliquidated	
Debtor 1 only	one.		☐ Disputed	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only			Student loans	
At least one of the debtors and	another		Obligations arising out of a separation agreement or divorce that	
Check if this claim is for a c	community debt		you did not report as priority claims	
Is the claim subject to offset?			☐ Debts to pension or profit-sharing plans, and other similar debts☐ Other. Specify	

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5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For

Debtor 1

MAYRA LOPEZ ACEVEDO

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Part 3:

List Others to Be Notified About a Debt That You Already Listed

				On which entry in Part 1 or Part 2 did you list the original creditor?
lame				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
lumber	Street			
tumber	Street			☐ Part 2: Creditors with Nonpriority Unsecured Claim
				Last 4 digits of account number
lity		State	ZIP Code	
lame				On which entry in Part 1 or Part 2 did you list the original creditor?
ame				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
umber	Street			☐ Part 2: Creditors with Nonpriority Unsecured
				Claims
		State	ZIP Code	Last 4 digits of account number
ity		Siste	ZIP Code	
lame				On which entry in Part 1 or Part 2 did you list the original creditor?
nari na				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
lumber	Street			☐ Part 2: Creditors with Nonpriority Unsecured
				Claims
			710.0	Last 4 digits of account number
ity		State	ZIP Code	
ame				On which entry in Part 1 or Part 2 did you list the original creditor?
				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
lumber	Street			☐ Part 2: Creditors with Nonpriority Unsecured
				Claims
City		State	ZIP Code	Last 4 digits of account number
ity		State	ZIF Code	
lame				On which entry in Part 1 or Part 2 did you list the original creditor?
				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
lumber	Street			☐ Part 2: Creditors with Nonpriority Unsecured
	Market Company			Claims
ity		State	ZIP Code	Last 4 digits of account number
ny		Oizie	ZIF COUG	On which entry in Part 1 or Part 2 did you list the original creditor?
lame				On which entry in Fart 1 or Fart 2 did you list the original creditor?
				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
lumber	Street			☐ Part 2: Creditors with Nonpriority Unsecured Claims
				Gianne
City		State	ZIP Code	Last 4 digits of account number
× .				On which entry in Part 1 or Part 2 did you list the original creditor?
lame	W		***	On which entry in Fart 1 or Fart 2 did you list the original creditor?
lumber	Street			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
umpet:	2000			Part 2: Creditors with Nonpriority Unsecured
			-	Claims
City		State	ZIP Code	Last 4 digits of account number

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Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

			Total claim	
Total claims	6a. Domestic support obligations	6a.	\$	0.00
from Part 1	6b. Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	+ \$	0.00
	6e. Total. Add lines 6a through 6d.	6e.	\$	0.00
			Total claim	
Total claims	6f. Student loans	6f.	\$	0.00
from Part 2	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	 Other. Add all other nonpriority unsecured claims. Write that amount here. 	6i.	+ \$	41,488.50
	6j. Total. Add lines 6f through 6i.	6j.	\$	41,488.50

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ERI	in this information to in	lontify ways	2250:			
all	l in this information to id					
Deb	MAYRA LOI			Last Name	3	
	btor 2 ouse If filing) First Name	Mic	Idle Name	Last Name		
383	ited States Bankruptcy Court					
940110	se number					
	known)	Uro nettworphysics				Check if this is an amended filing
						3
Of	ficial Form 106	G				
Sc	hedule G: E	xecut	orv Contra	cts and Ur	nexpired Leases	12/15
infor addi 1.	rmation. If more space is itional pages, write your Do you have any execu No. Check this box a Yes. Fill in all of the in	s needed, co name and c ntory contrac nd file this for nformation be rson or com, ease, cell ph	py the additional pagase number (if known ts or unexpired lease m with the court with yolow even if the contract pany with whom you one). See the instruct	ge, fill it out, number n). es? your other schedules. cts or leases are listed have the contract or ions for this form in the	r, both are equally responsible for supthe entries, and attach it to this page. You have nothing else to report on this for an Schedule A/B: Property (Official Form lease. Then state what each contract is instruction booklet for more examples of the State what the contract or lease is	orm. m 106A/B). or lease is for (for of executory contracts and
2.1	CAPITAL MGMT. N	ЛАINTENA	NCE	NT.	MESHARE	
	Name					
	PO BOX 864964 Number Street					
	ORLANDO City	FL State	32886 ZIP Code			
2.2	CONST.			69		
2.2	VACATION VILLAC	GE AT PAF	RKWAY	TIN	MESHARE	
	PO BOX 405947					
	Number Street FT LAUDERDALE	FL	33335			
	City	State	ZIP Code	· · · · · · · · · · · · · · · · · · ·		
2.3						
	Name					
	Number Street					
	City	State	ZIP Code			
2.4	J.,					
	Name		made have	E		
	Number Street			A		
	Manipel Street					
0 -	City	State	ZIP Code			
2.5	Name					
	TABILIE					
	Number Street					
	City	State	ZIP Code	and the first of the second of		

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Debtor 1

MAYRA LOPEZ ACEVEDO

MATRAL	OPEZ ACEVI		
First Name	Middle Name	Lost Name	

Case number (if known)_____

	100	Ä	Addi

Additional Page if You Have More Contracts or Leases

	Person or	company wit	h whom you h	nave the contract or lease	What the contract or lease is for
2.2				w) F-11	
	Name				_
	Number	Street			
	City		State	ZIP Code	400 Phillips 4 5 5 1
2					_
	Name				
	Number	Street			
	City		State	ZIP Code	
2					
	Name				
	Number	Street		3.0000 U.S. 10000	
	City		State	ZIP Code	
2					
	Name				_
	Number	Street			
	City		State	ZIP Code	_
2					
	Name				
	Number	Street			
	City		State	ZIP Code	
2	Oily			mi states	
2	Name				
	Number	Street			
		Street			
	City		State	ZIP Code	
2	Name			A SECOND TO THE	
					<u></u>
	Number	Street			
	City		State	ZIP Code	
2					
	Name				
	Number	Street			
	City		State	ZIP Code	

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Fill in this i	information to ide	entify your case:			
Debtor 1	MAYRA LOP	EZ ACEVEDO		_	
Deptor 1	First Name	Middle Name	Last Name		
Debtor 2				_	
(Spouse, if filing	g) First Name	Middle Name	Last Name		
United States	s Bankruptcy Court fo	or the: District of Puerto Ric	0		
Case number	r				☐ Check if this is an
					amended filing

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and

o you have any codebtors? (If y	you are filling a joint case, do	not list either spouse as	u oodobio.	
Yes				
/ithin the last 8 years, have you rizona, California, Idaho, Louisia	u lived in a community prop na, Nevada, New Mexico, Pu	erty state or territory? erto Rico, Texas, Wash	(<i>Communi</i> ington, and	ty property states and territories include Wisconsin.)
No. Go to line 3.				
Yes. Did your spouse, former	spouse, or legal equivalent liv	ve with you at the time?		
□ No				
☐ Yes. In which community s	state or territory did you live?		Fill in the n	ame and current address of that person.
Name of your spouse, former spo	ouse, or legal equivalent			
Number Street				
City	State	ZIP Code		
hown in line 2 again as a code Schedule D (Official Form 106D	ebtor only if that person is a 0), Schedule E/F (Official Fo	quarantor or cosigner	r. Make sui le G (Offici	re you have listed the creditor on its fail Form 106G). Use <i>Schedule D,</i>
Schedule D (Official Form 106D Schedule E/F, or Schedule G to	ebtor only if that person is a 0), Schedule E/F (Official Fo	quarantor or cosigner	r. Make sui le G (Offici	re you have listed the creditor on ial Form 106G). Use <i>Schedule D,</i>
shown in line 2 again as a code Schedule D (Official Form 106D Schedule E/F, or Schedule G to	ebtor only if that person is a 0), Schedule E/F (Official Fo	quarantor or cosigner	r. Make sui le G (Offici Colu	re you have listed the creditor on ial Form 106G). Use Schedule D, umn 2: The creditor to whom you owe the de
hown in line 2 again as a code Schedule D (Official Form 106D Schedule E/F, or Schedule G to	ebtor only if that person is a 0), Schedule E/F (Official Fo	quarantor or cosigner	r. Make sur le G (Offici Colu Che	re you have listed the creditor on ial Form 106G). Use Schedule D, umn 2: The creditor to whom you owe the de
hown in line 2 again as a code Schedule D (Official Form 106D Schedule E/F, or Schedule G to Column 1: Your codebtor	ebtor only if that person is a 0), Schedule E/F (Official Fo	quarantor or cosigner	r. Make sur	re you have listed the creditor on ial Form 106G). Use Schedule D, umn 2: The creditor to whom you owe the deeck all schedules that apply: Schedule D, line
hown in line 2 again as a code chedule D (Official Form 106D schedule E/F, or Schedule G to Column 1: Your codebtor	ebtor only if that person is a 0), Schedule E/F (Official Fo	quarantor or cosigner	r. Make sur	re you have listed the creditor on ial Form 106G). Use Schedule D, umn 2: The creditor to whom you owe the deeck all schedules that apply: Schedule D, line Schedule E/F, line
hown in line 2 again as a code chedule D (Official Form 106D chedule E/F, or Schedule G to Column 1: Your codebtor Name Number Street City	ebtor only if that person is a 0), Schedule E/F (Official Fo 0 fill out Column 2.	guarantor or cosigner rm 106E/F), or Schedu	Colu	re you have listed the creditor on ial Form 106G). Use Schedule D, umn 2: The creditor to whom you owe the deeck all schedules that apply: Schedule D, line Schedule E/F, line
chown in line 2 again as a code Schedule D (Official Form 106D Schedule E/F, or Schedule G to Column 1: Your codebtor Name Number Street	ebtor only if that person is a 0), Schedule E/F (Official Fo 0 fill out Column 2.	guarantor or cosigner rm 106E/F), or Schedu	Colu	re you have listed the creditor on ial Form 106G). Use Schedule D, amn 2: The creditor to whom you owe the de eck all schedules that apply: Schedule D, line Schedule E/F, line Schedule G, line
chown in line 2 again as a code Schedule D (Official Form 106D Schedule E/F, or Schedule G to Column 1: Your codebtor Name Number Street City	ebtor only if that person is a 0), Schedule E/F (Official Fo 0 fill out Column 2.	guarantor or cosigner rm 106E/F), or Schedu	Colu	re you have listed the creditor on ial Form 106G). Use Schedule D, umn 2: The creditor to whom you owe the de eck all schedules that apply: Schedule D, line Schedule E/F, line Schedule G, line
chown in line 2 again as a code Schedule D (Official Form 106D Schedule E/F, or Schedule G to Column 1: Your codebtor Name Number Street City	ebtor only if that person is a 0), Schedule E/F (Official Fo 0 fill out Column 2.	guarantor or cosigner rm 106E/F), or Schedu	Colu	re you have listed the creditor on ial Form 106G). Use Schedule D, umn 2: The creditor to whom you owe the de eck all schedules that apply: Schedule D, line Schedule E/F, line Schedule D, line Schedule D, line
chown in line 2 again as a code Schedule D (Official Form 106D Schedule E/F, or Schedule G to Column 1: Your codebtor Name Number Street Number Street	ebtor only if that person is a 0), Schedule E/F (Official Fo 0 fill out Column 2. State	guarantor or cosigner rm 106E/F), or Schedu ZIP Code	Colu	re you have listed the creditor on ial Form 106G). Use Schedule D, ymn 2: The creditor to whom you owe the deeck all schedules that apply: Schedule D, line Schedule E/F, line Schedule D, line Schedule D, line Schedule D, line Schedule G, line
chown in line 2 again as a code Schedule D (Official Form 106D Schedule E/F, or Schedule G to Column 1: Your codebtor Name Number Street Number Street	ebtor only if that person is a 0), Schedule E/F (Official Fo 0 fill out Column 2. State	guarantor or cosigner rm 106E/F), or Schedu ZIP Code	Colu	re you have listed the creditor on ial Form 106G). Use Schedule D, umn 2: The creditor to whom you owe the de eck all schedules that apply: Schedule D, line Schedule E/F, line Schedule D, line Schedule D, line Schedule E/F, line Schedule G, line Schedule D, line
chown in line 2 again as a code Schedule D (Official Form 106D Schedule E/F, or Schedule G to Column 1: Your codebtor Name Number Street City Name Number Street	ebtor only if that person is a 0), Schedule E/F (Official Fo 0 fill out Column 2. State	guarantor or cosigner rm 106E/F), or Schedu ZIP Code	Colu	re you have listed the creditor on ial Form 106G). Use Schedule D, ymn 2: The creditor to whom you owe the de eck all schedules that apply: Schedule D, line Schedule E/F, line Schedule D, line Schedule D, line Schedule D, line Schedule G, line

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Debtor 1

MAYRA	LOPEZ	ACEV	EDO
	44 (11-1)		Local Marris

Column 1:	Your codebtor			Column 2: The creditor to whom you owe the deb
001011111				Check all schedules that apply:
				Schedule D, line
Name				☐ Schedule E/F, line
				─ Schedule G, line
Number	Street			
City		State	ZIP Code	
				Schedule D, line
Name				Schedule E/F, line
	ra-tra-Military			Schedule G, line
Number	Street			9 -1 53224
City		State	ZIP Code	
Oily				C. Colordala D. line
Name				Schedule D, line □ Schedule E/F, line
				Schedule G, line
Number	Street			Galedale of the
-		State	ZIP Code	
City		Vidio		
				Schedule D, line
Name				☐ Schedule E/F, line
Number	Street		- I I I I I I I I I I I I I I I I I I I	Schedule G, line
				<u></u>
City		State	ZIP Code	
				Schedule D, line
Name				☐ Schedule E/F, line
Number	Street			□ Schedule G, line
Number				
City		State	ZIP Code	
		one of any stages of the same of the same		Schedule D, line
Name				☐ Schedule E/F, line
Nip and b	Street			── Schedule G, line
Number	Street			
City		State	ZIP Code	
14			•	Schedule D, line
Name				Schedule E/F, line
				Schedule G, line
Number	Street			
City		State	ZIP Code	
]				O Schedule D line
Name				Schedule D, line
1.000				Schedule G, line
Number	Street			
		State	ZIP Code	

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Fill in this information to identify y	our case:				
Debtor 1 MAYRA LOPEZ A					
First Name Debtor 2	Middle Name Las	st Name			
(Spouse, if filing) First Name	Tenado I torro	st Name			
United States Bankruptcy Court for the: D				Check if thi	o io:
Case number (If known)				An ame	
				☐ A supple	ement showing postpetition chapter 13 as of the following date:
Official Form 106I				MM / DD	7/ YYYY
Schedule I: You	r Income				12/15
	u are married and not filing se is not filing with you, do top of any additional pages	j jointly, and your	spouse is i	ıt vour spou	2), both are equally responsible for ou, include information about your spouse. se. If more space is needed, attach a lown). Answer every question.
Fill in your employment information.		Debtor 1			Debtor 2 or non-filling spouse
If you have more than one job, attach a separate page with information about additional employers.	Employment status	☐ Employed ☐ Not employed			☐ Employed ☐ Not employed
Include part-time, seasonal, or self-employed work.					
Occupation may include student or homemaker, if it applies.	Occupation				
	Employer's name				
	Employer's address				
		Number Street			Number Street
		City	State ZIP (Code	City State ZIP Code
	How long employed there	1000000			
	now long ampleyou areas				
Part 2: Give Details About	t Monthly Income				
Estimate monthly income as of spouse unless you are separated if you or your non-filing spouse he below. If you need more space, a	l. ave more than one employer	, combine the infor			rite \$0 in the space. Include your non-filing or that person on the lines
below. If you need more special			For	Debtor 1	For Debtor 2 or
		are all payre!	N	***************************************	non-filing spouse
List monthly gross wages, sal deductions). If not paid monthly	calculate what the monthly t	wage would be.	2. \$		\$
3. Estimate and list monthly ove	rtime pay.		3. +\$		+ \$
4. Calculate gross income. Add l	ine 2 + line 3.		4. \$	0.00	\$

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MAYRA LOPEZ ACEVEDO Debtor 1 Case number (if known) For Debtor 1 For Debtor 2 or non-filing spouse 0.00 Copy line 4 here..... 5. List all payroll deductions: 0.00 5a. Tax, Medicare, and Social Security deductions 5a. 5b. Mandatory contributions for retirement plans 5b. 0.00 0.00 5c. Voluntary contributions for retirement plans 5c. 0.00 5d. Required repayments of retirement fund loans 5d. 0.00 5e. Insurance 5e. 0.00 5f. Domestic support obligations 5f. 0.00 5g. 5g. Union dues 0.00 5h. 5h. Other deductions. Specify: Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h. 0.00 6 0.00 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total 0.00 monthly net income. 8a. 0.00 8b. Interest and dividends 8b 8c. Family support payments that you, a non-filing spouse, or a dependent Include alimony, spousal support, child support, maintenance, divorce 0.00 80 settlement, and property settlement. 0.00 8d. Unemployment compensation 8d. 8e. Social Security 8e 1,985.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 0.00 8f. Specify: 8g. 0.00 8g. Pension or retirement income 8h. Other monthly income. Specify: Husband Contribution 8h 0.00 1,985.00 9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. 10. Calculate monthly income. Add line 7 + line 9. 1,985.00 1,985.00 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. 0.00 11. + Specify: 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. 1,985.00 Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies 12 Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? No.

Yes. Explain:

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Fill in this information to identify y	our case:				74	
		CENTRAL PROCESSION				
Debtor 1 MAYRA LOPEZ ACEVEDO First Name Middle Name Last Name Check if this						
Debtor 2 (Spouse, if filing) First Name Middle Name Last Name						
United States Bankruptcy Court for the: District of Puerto Rico A supplement showing postpetition chapt expenses as of the following date:						
Case number MM / DD /			D / YYYY	=:		
(If known)						
Official Form 106J						
Schedule J: Your Expenses						
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.						
Part 1: Describe Your Household						
Is this a joint case?						
✓ No. Go to line 2. ☐ Yes. Does Debtor 2 live in a se	eparate household?					
☐ No						
Yes, Debtor 2 must file	Official Form 106J-2, Expenses for S	eparate Household of Debtor 2.			***************************************	
Do you have dependents? Do not list Debtor 1 and	Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2		ependent's ge	Does dependent live with you?	
Debtor 2. Do not state the dependents' names.		SON	1	19yrs	□ No	
		<u> </u>	_		☑ Yes	
					☐ No☐ Yes	
					☐ No	
					☐ Yes	
					☐ No☐ Yes	
					□ No	
					☐ Yes	
Do your expenses include expenses of people other than yourself and your dependents?	☑ No □ Yes					
Part 2: Estimate Your Ongoi	ng Monthly Expenses					
Estimate your expenses as of your	bankruptcy filing date unless you	are using this form as a supp	lement in a	Chapter 13	case to report	
expenses as of a date after the ban	kruptcy is filed. If this is a supplem	ental Schedule J, check the b	ox at the t	op of the for	m and fill in the	
applicable date.	and accomment aggistance if yo	u know the value of				
Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.) Your expenses					enses	
 The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 			4.	\$	0.00	
If not included in line 4:					2.22	
4a. Real estate taxes		4a.	\$	0.00		
4b. Property, homeowner's, or renter's insurance			4b.	\$	0.00	
4c. Home maintenance, repair, and upkeep expenses		4c.	\$	0.00		
4d. Homeowner's association or condominium dues			4d.	\$	0.00	

Debtor 1

MAYRA	LOPEZ	ACEVEDO	
	A.E. stalle, O.La	me tast Name	

Case number (if known)_____

Name				Your exp	enses
		the second section of the section of th	5	\$	0.00
Se Electricity, heat, natural gas 95.50	5	Additional mortgage payments for your residence, such as nome equity loans	J.		
Electricity, heat, natural gas	6.		6.5	e	95.50
Section Martice Sewer, garrage collection Section Sectio		6a. Electricity, heat, natural gas		1011 <u></u>	20.00
Sect Telephone, cite pronount interiors, satisfacture,				31-	
				ō	AND
7. Food and housekeeping supplies 7. 8. 0.00 8. Childcare and children's education costs 8. 5 0.00 9. Clothing, laundry, and dry cleaning 9. \$ 100.00 10. Personal care products and services 10. \$ 100.00 11. Medical and dental expenses 11. \$ 100.00 12. Transportation, Include gas, maintenance, bus or train fare. 12. \$ 150.00 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$ 150.00 14. Charitable contributions and religious donations 14. \$ 40.00 15. Insurance. 15. \$ 25.00 16. Taxes. Do not include insurance deducted from your pay or included in lines 4 or 20. 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 17. Installment or lease payments: 15. \$ 0.00 18. Late insurance 15. \$ 0.00 19. Installment or lease payments: 17. \$ 0.00 19. Cother, Specify: 17. \$ 0.00 19. Cother, Specify: 17. \$ 0.00 19. Vour payments for Vehicle 2 17. \$ 0.00 19. Vour payments of alimony, maintenance, and support that you did not report as deducted from your pay or line included in lines 4 or 5 of this form or on Schedule I: Your Income (Official Form 1061). 19. \$ 0.00 19. Other repayments on other property 20. \$ 0.00 20. Meritages on other property 20. \$ 0.00 20. Real estate Laxes 20. \$ 0.00 20. Meritages on other property 20. \$ 0.00 20. Merit		6d. Other. Specify:		\$	
Clothing, laundry, and dry cleaning 9	7.	Food and housekeeping supplies	7.	\$	0.00
5. Clothing, laundry, and dry cleaning 10. \$ 100.00 7. Personal care products and services 10. \$ 100.00 8. Health Insurance 10. \$ 100.00 9. Health Insurance 10. \$ 150.00 15. Health Insurance 15. \$ 25.00 15. Life insurance 15. \$ 25.00 15. Vehicle insurance 15. \$ 25.00 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$ 25.00 17. Lother insurance 15. \$ 25.00 18. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$ 25.00 17. Lother insurance 17. \$ 25.00 18. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$ 25.00 17. Lother. Specify 17. \$ 25.00 18. Your payments for Vehicle 2 17. \$ 25.00 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule 1, Your Income (Official Form 1061). \$ 25.00 18. Your payments you make to support others who do not live with you. \$ 25.00 18. Your payments you make to support others who do not live with you. \$ 25.00 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule 1:	8.	Childcare and children's education costs	8.	\$	
10 Personal care products and services 11. Medical and dental expenses 11. \$ 100.00 12 Transportation. Include gas. maintenance, bus or train fare. Do not include car payments 12 150.00 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$ 150.00 14. Charitable contributions and religious donations 14. \$ 40.00 15. Insurance 15. \$ 25.00 15. Life insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. \$ 95.00 15. Vehicle insurance 15b. \$ 95.00 15. Vehicle insurance 15c. \$ 0.000 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 15c. \$ 0.000 17. Installment or lease payments 15c. \$ 0.000 18. Your payments for Vehicle 2 17b. \$ 0.000 19. Other, Specify 17c. 0.000 10. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule 1, Your Income (Official Form 105l). 15c. 0.000 19. Other payments you make to support others who do not live with you. 15c. 0.000 19. Other payments you make to support others who do not live with you. 15c. 0.000 19. Other payments you make to support others who do not live with you. 15c. 0.000 19. Other payments you make to support others who do not live with you. 15c. 0.000 19. Other payments you make to support others who do not live with you. 15c. 0.000 19. Other payments you make to support support you did not report as deducted from your pay on line 5, Schedule 1, Your Income (Official Form 105l). 15c. 0.0	9.	Clothing, laundry, and dry cleaning	9.	\$	
11. Medical and dental expenses 150.00	10.	Personal care products and services	10.	\$	
Do not include car payments 12	11.	Medical and dental expenses	11.	\$	100.00
Entertainment, clubs, recreation, newspapers, magazines, and books 15. 3	12.		12.	\$	
14. Charitable contributions and religious donations 14. \$ 40.00 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15a. \$ 25.00 15b. Health insurance 15b. \$ 95.00 15c. Vehicle insurance 15c. \$ 0.00 15d. Other insurance. Specify:	13	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	150.00
15. Insurance.			14.	\$	40.00
Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. \$ 95.00 15b. Health insurance 15b. \$ 95.00 15c. Vehicle insurance 15c. \$ 0.00 15d. Other insurance. Specify:					
15a. Life insurance 15a. S 95.00 15b. Health insurance 15b. S 95.00 15c. Vehicle insurance 15c. S 0.00 15d. Other insurance. Specify: 15d. S 0.00 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 15d. S 0.00 Specify: 16. S 0.00 17. Installment or lease payments: 17a. S 0.00 17a. Car payments for Vehicle 1 17a. S 0.00 17b. Car payments for Vehicle 2 17b. S 0.00 17c. Other. Specify: 17c. S 0.00 17d. Other. Specify: 17d. S 0.00 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule 1, Your Income (Official Form 106i). 18. S 0.00 19. Other payments you make to support others who do not live with you. 19. S 0.00 20a. Mortgages on other property 20a. S 0.00 20b. Real estate taxes 20b. S 0.00 20c. Property, homeowner's, or renter's insurance 20c. S 0.00 20d. Maintenance, repair, and upkeep expenses 20d. Maintenance, repair, and upkeep expenses 20d. S<	10.	Do not include insurance deducted from your pay or included in lines 4 or 20.			
15b. Health insurance 15c. Vehicle insurance 15c. Vehicle insurance 15c. Vehicle insurance 15c. Vehicle insurance 15c. S		15a. Life insurance	15a.	\$	
15c. Vehicle insurance 15d. Other insurance, Specify: 15d. Other insurance, Specify: 15d. S 0.00 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16. \$ 0.00 17b. Car payments for Vehicle 1 17a. Car payments for Vehicle 2 17b. Car payments for Vehicle 2 17c. Other. Specify: 17d. Other spayments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. Your payments you make to support others who do not live with you. Specify: 19. \$ 0.00 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses		15b. Health insurance	15b.	\$	
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:		15c. Vehicle insurance	15c.	\$	
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:			15d.	\$	0.00
17. Installment or lease payments: 17a. Car payments for Vehicle 1 17a. Car payments for Vehicle 2 17b. Car payments for Vehicle 2 17b. Car payments for Vehicle 2 17c. Other, Specify: 17c. S 0.00					
17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: 17d. Other spyments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule 1, Your Income (Official Form 1061). 18. Specify: 19. Other payments you make to support others who do not live with you. Specify: 19. Specify: 19. Specify: 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule 1: Your Income. 20a. Mortgages on other property 20b. Real estate taxes 20b. \$0.00 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses	16.		16.	\$	0.00
17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify:					
17a. Car payments for Vehicle 2 17b. Car payments for Vehicle 2 17c. Other. Specify: 17c. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. S 18d. S 18d. S 18d. S 18d. S 19d.	17.		175	s	0.00
17b. Car payments for Vehicle 2 17c. Other, Specify:		17a. Car payments for Vehicle 1		9	0.00
17c. Other. Specify:		17b. Car payments for Vehicle 2			SA CONTRACTOR
17d. Other. Specify:				Φ	
your pay on line 5, Schedule I, Your Income (Official Form 106i). 19. Other payments you make to support others who do not live with you. Specify:		17d. Other, Specify:	17d.	Φ	0.00
Specify: 19. \$ 0.00 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. \$ 0.00 20a. Mortgages on other property 20a. \$ 0.00 20b. Real estate taxes 20b. \$ 0.00 20c. Property, homeowner's, or renter's insurance 20c. \$ 0.00 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00	18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
Specify: 19. \$ 0.00 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. \$ 0.00 20a. Mortgages on other property 20a. \$ 0.00 20b. Real estate taxes 20b. \$ 0.00 20c. Property, homeowner's, or renter's insurance 20c. \$ 0.00 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00	19.	Other payments you make to support others who do not live with you.			
20a. Mortgages on other property 20a. \$			19.	\$	0.00
20a. Mortgages on other property 20a. \$	20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incomp	ne.		
20b. Real estate taxes 20b. \$ 0.00 20c. Property, homeowner's, or renter's insurance 20c. \$ 0.00 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00				\$	0.00
20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00			20b.	\$	0.00
20d. Maintenance, repair, and upkeep expenses 20d. \$			20c.	\$	0.00
0.00			20d.	\$	0.00
200 Homeowner's association of conduminating ones		20e. Homeowner's association or condominium dues	20e.	\$	0.00

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De	btor 1	MAYRA LOPEZ ACEVEDO First Name Middle Name Last Name	Case number (if known)		
21.	Othe	er. Specify:	21.	+\$	0.00
22.	Calc	ulate your monthly expenses.			
	22a.	Add lines 4 through 21.	22a.	\$	1,988.40
	22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	22b.	\$	0.00
		Add line 22a and 22b. The result is your monthly expenses.	22c.	\$	1,988.40
23.	Calcu	ulate your monthly net income.		s	1,985.00
	23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a.		
	23b.	Copy your monthly expenses from line 22c above.	23b.	-\$	1,988.40
	23c.	Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c.	\$	-34.00
	- 201	ou expect an increase or decrease in your expenses within the year after you fi	ile this form?		
24					
	For e	example, do you expect to finish paying for your car loan within the year or do you exp gage payment to increase or decrease because of a modification to the terms of your	r mortgage?		
	V N	lo.			
	□ Y	es. Explain here:			

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. Fill in this	information to identi					
Debtor 1	MAYRA LOPEZ	ACEVEDO Middle Name	Last Name			
Debtor 2	ing) First Name	Middle Name	Last Name			
		e: District of Puerto Ricc	j.			
Case numb						Check if this is an
(If known)						amended filing
Officia	l Form 107					
Officia	mont of Fin	ancial Affair	s for Indivi	duals Filing for	Bankruptcy	04/16
			tls are filing	together, both are equally re-	sponsible for supplying	ig correct
informatio	n. If more space is no	eeded, attach a separat	e sheet to this form	n. On the top of any additiona	l pages, write your na	me and case
number (if	known). Answer ever	ry question.				
Part 1:	Give Details Abo	ut Your Marital Stat	us and Where Yo	u Lived Before		
1. What	is your current marita	ai status?				
10.75	larried lot married					
2. Durir	ig the last 3 years, ha	ve you lived anywhere	other than where y	ou live now?		
	lo	s you lived in the last 3 y	ears Do not include	where you live now.		
Y		s you lived in the idea o	Dates Debtor 1	Debtor 2:		Dates Debtor 2
	Debtor 1:		lived there			lived there
				☐ Same as Debtor 1		☐ Same as Debtor 1
	APT 206		From	S		From
	Number Street		То	Number Street		То
	A COND PASEO	DEGETAU	_	2		
	CAGUAS	PR 00725 State ZIP Code	-3	City	State ZIP Code	
	Oity	POTENTIAL DESIGN AND AND A		Same as Debtor 1		☐ Same as Debtor 1
						From
	Number Street		From To	Number Street		То
			_		7000	
	City	State ZIP Code		City	State ZIP Code	
2 10/16	hin the last 8 years di	id you ever live with a s	pouse or legal equ	ivalent in a community prope	erty state or territory?	(Community property
stat	es and territories includ	le Arizona. California, Ida	aho, Louisiana, Neva	ida, New Mexico, Puerto Rico,	Texas, Washington, an	d Wisconsin.)
		out Schedule H: Your C	odebtors (Official Fo	rm 106H).		
Al	Yes. Make sure you mi	out scriedile ii. Four G	ouebiors (Omoidi i o			
	_					
Part 2	Evolain the Sau	rces of Your Income				The Charles of the Control of the Co

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	me		mber (if known)	
Did you have any income from employment Fill in the total amount of income you received If you are filing a joint case and you have incor	from all ions and all busin	esses, including part in	ne donvince.	ndar years?
☑ No				
Yes. Fill in the details.			Debtor 2	
	Debtor 1	Gross income	Sources of income	Gross income
	Sources of income Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)
From January 1 of current year until	Wages, commissions, bonuses, tips	\$	Wages, commissions, bonuses, tips	\$
the date you filed for bankruptcy:	Operating a business		Operating a business	
For last calendar year:	Wages, commissions, bonuses, tips	\$	☐ Wages, commissions, bonuses, tips	\$
(January 1 to December 31, 2015)	Operating a business	- Sept. 20	Operating a business	
For the calendar year before that:	Wages, commissions, bonuses, tips		Wages, commissions, bonuses, tips	\$
(January 1 to December 31, 2014	Operating a business	\$	Operating a business	-
Include income renarriess of whether that its	and is toyoble Lyampie	ous calendar years? s of other income are ali	imony; child support; Social	Security,
unemployment, and other public benefit paying gambling and lottery winnings. If you are filing List each source and the gross income from No	come is taxable. Example: nents; pensions; rental inc g a joint case and you hav	s of other income are an come; interest; dividends re income that you recei	ived together, not it only one	
unemployment, and other public benefit payn gambling and lottery winnings. If you are filing List each source and the gross income from	come is taxable. Example: nents; pensions; rental inc g a joint case and you hav	s of other income are an come; interest; dividends re income that you recei	ived together, list it only onc	
unemployment, and other public benefit paying gambling and lottery winnings. If you are filing List each source and the gross income from No	come is taxable. Example: nents; pensions; rental inc g a joint case and you hav each source separately. D	s of other income are an come; interest; dividends re income that you recei	ived together, list it only one nat you listed in line 4. Debtor 2 Sources of income Describe below.	Gross income from each source
unemployment, and other public benefit paying gambling and lottery winnings. If you are filing List each source and the gross income from No Yes. Fill in the details.	Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	ived together, list it only one nat you listed in line 4. Debtor 2 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
unemployment, and other public benefit paying gambling and lottery winnings. If you are filing List each source and the gross income from No	Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	ived together, list it only one nat you listed in line 4. Debtor 2 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
unemployment, and other public benefit paying gambling and lottery winnings. If you are filing List each source and the gross income from No Yes. Fill in the details.	Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	ived together, list it only one nat you listed in line 4. Debtor 2 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
unemployment, and other public benefit paying gambling and lottery winnings. If you are filing List each source and the gross income from No Yes. Fill in the details.	Debtor 1 Sources of income Describe below. Social Security Social Security	Gross income from each source (before deductions and exclusions) \$ 15,880.00 \$ 23,820.00	Debtor 2 Sources of income Describe below.	Gross income from each source (before deductions and exclusions) \$
unemployment, and other public benefit paying gambling and lottery winnings. If you are filling. List each source and the gross income from Income I	Debtor 1 Sources of income Describe below. Social Security Social Security	Gross income from each source (before deductions and exclusions) \$ 15,880.00 \$ 23,820.00 \$	Debtor 2 Sources of income Describe below.	Gross income from each source (before deductions and exclusions) \$\$ \$\$ \$\$ \$\$ \$\$
unemployment, and other public benefit paying gambling and lottery winnings. If you are filling. List each source and the gross income from No Yes. Fill in the details. From January 1 of current year until the date you filed for bankruptcy:	Debtor 1 Sources of income Describe below. Social Security Social Security	Gross income from each source (before deductions and exclusions) \$ 15,880.00 \$ 23,820.00 \$	Debtor 2 Sources of income Describe below.	Gross income from each source (before deductions and exclusions) \$\$ \$\$ \$\$ \$\$ \$\$

(January 1 to December 31, $\frac{2014}{\text{YYYY}}$)

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Debtor 1

MAYRA LO	PEZ ACEVE	DO	Case number (if known)	
First Name	Middle Name	Last Name		

	st Certain Payments You Wade E				
NO. 100		rily consumer debts	s?		
either	Debtor 1's or Debtor 2's debts prima	my consumer asset		defined in 11 U.S.C. 8 101/3	8) as
347	either Debtor 1 nor Debtor 2 has prin ncurred by an individual primarily for a p	personal, laililly, or in	ouseriold purpose.		o, ao
D	ouring the 90 days before you filed for ba	ankruptcy, did you pa	ay any creditor a total of t	\$0,425 of more:	
	No. Go to line 7.				
	Yes. List below each creditor to whore total amount you paid that credit child support and alimony. Also	tor. Do not include pa , do not include payπ	nents to an attorney for the	his bankruptcy case.	
*	Subject to adjustment on 4/01/19 and 6	every 3 years after th	at for cases filed on or a	fter the date of adjustment.	
Yes F	Debtor 1 or Debtor 2 or both have prin	marily consumer de	bts.		
[During the 90 days before you filed for b	ankruptcy, did you pa	ay any creditor a total of	\$600 or more?	
	✓ No. Go to line 7.				
		ld = total of	seno or more and the to	ntal amount you paid that	
Į	Yes. List below each creditor to who creditor. Do not include paymen	nts for domestic subt	JOH ODINATIONS, Such as	Offing publishers	
	alimony. Also, do not include pa	ayments to an attorn	ey for this bankruptcy ca	ise.	
		Dates of payment	Total amount paid	Amount you still owe	Was this payment for.
			\$	\$	☐ Mortgage
	Creditor's Name				☐ Car
	Court was				☐ Credit card
	Number Street				Π.
	Number				Loan repayment
	Number 5400		N.		
			5.		
		 Code			☐ Suppliers or vendo
		^o Code	\$	\$	☐ Suppliers or vendo
		^o Code	\$	\$	Suppliers or vendo
	C _i ty State ZIF	^o Code	\$	\$	□ Suppliers or vendo □ Other
	C _i ty State ZIF	^o Code	\$	\$	□ Suppliers or vendor □ Other □ Mortgage □ Car
	City State ZIF	^o Code	\$	\$	□ Suppliers or vendor □ Other □ Mortgage □ Car □ Credit card □ Loan repayment
	City State ZIF	P Code	\$	\$\$	□ Suppliers or vendor □ Other □ Mortgage □ Car □ Credit card □ Loan repayment
	City State ZIF Creditor's Name Number Street	P Code	\$	\$\$	□ Suppliers or vendor □ Other □ Mortgage □ Car □ Credit card □ Loan repayment □ Suppliers or vendor
	City State ZIF Creditor's Name Number Street		\$	<u> </u>	□ Suppliers or vendor □ Other □ Mortgage □ Car □ Credit card □ Loan repayment □ Suppliers or vendor
	City State ZIF Creditor's Name Number Street		\$\$	\$\$	□ Suppliers or vendor □ Other □ Mortgage □ Car □ Credit card □ Loan repayment □ Suppliers or vendor
	City State ZIF Creditor's Name Number Street				□ Suppliers or vendor □ Other □ Mortgage □ Car □ Credit card □ Loan repayment □ Suppliers or vendor □ Other
	Creditor's Name Number Street City State ZI Creditor's Name				□ Suppliers or vendor □ Other □ Mortgage □ Car □ Credit card □ Loan repayment □ Suppliers or vendor □ Other
	Creditor's Name Number Street City State ZIF				□ Suppliers or vendor □ Other □ Mortgage □ Car □ Credit card □ Loan repayment □ Suppliers or vendor □ Other
	Creditor's Name Number Street City State ZI Creditor's Name				□ Suppliers or vendor □ Other □ Mortgage □ Car □ Credit card □ Loan repayment □ Suppliers or vendor □ Other □ Mortgage □ Car □ Credit card

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or 1	MAYRA LOPEZ ACEVEDO		C	ase number (if known)	
21 1	First Name Middle Name Last Name				
Inside corpo agent	in 1 year before you filed for bankruptcy, did y lers include your relatives; any general partners; in prations of which you are an officer, director, person, int, including one for a business you operate as a second support and alimony.	relatives of any g	owner of 20% or m	nore of their votina s	securities; and any managing
V N	No				
□ Y	res. List all payments to an insider.	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
			\$	\$	
	Insider's Name	-	Ψ		
	Number Street				
		_			
	City State ZIP Code				
	1.509			•	
			\$	\$	
	Insider's Name				
	Number Street				
	City State ZIP Code	_			
an i Incl	hin 1 year before you filed for bankruptcy, did insider? Idude payments on debts guaranteed or cosigned No Yes. List all payments that benefited an insider.		Total amount paid	Amount you still owe	
		_	\$	\$	
	Insider's Name				
	Number Street				
	particle in sold				
	City State ZIP Code				
			e.	\$	
			. \$	_ \$	7
	Insider's Name				
	Number Street		,		
			=		

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MAYRA LOPEZ ACEVEDO Case number (if known)_ Debtor 1 First Name Identify Legal Actions, Repossessions, and Foreclosures Part 4: 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. ☐ No Yes. Fill in the details. Status of the case Court or agency Nature of the case Collection of Money and First Instance Court Pending Case title Collection of Money Court Name Foreclosure On appeal and Foreclosure ☑ Concluded Number Street PR 00727 Case number E CD2016-0072 Caguas ZIP Code State Pending Court Name Case title On appeal Concluded Street Case number ZIP Code State 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Value of the property Date Describe the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. Property was attached, seized, or levied. State ZIP Code Value of the property Date Describe the property Creditor's Name Number Street Explain what happened Property was repossessed. Property was foreclosed.

City

State

ZIP Code

Property was garnished.

Property was attached, seized, or levied.

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MAYRA LOPEZ ACEVEDO		ase number (if known)
First Name Middle Name Last Nar	ne	
		s and institution and off any amounts from Volling
n 90 days before you filed for bankrupt unts or refuse to make a payment beca	cy, did any creditor, including a bank or	r financial institution, set off any amounts from you
	use you owed a desc.	
0		
es. Fill in the details.		
	Describe the action the creditor took	Date action Amount was taken
reditor's Name		
Salto, S. Harris		\$
umber Street		
ity State ZIP Code	Last 4 digits of account number: XXXX-	
		the benefit of
in 1 year before you filed for bankrupto	cy, was any of your property in the poss	ession of an assignee for the benefit of
itors, a court-appointed receiver, a cus	todian, or another official?	
40		
/es		
List Certain Gifts and Contribut	tions	
in 2 years before you filed for bankrup	tcy, did you give any gifts with a total va	alue of more than \$600 per person?
	toy, and you give any give	
No		
Yes. Fill in the details for each gift.		
		Dates you gave Value
Gifts with a total value of more than \$600	Describe the gifts	the gifts
per person		
	_	\$
Person to Whom You Gave the Gift		
		· \$
	2	
Number Street		
	_	
City State ZIP Code		
Person's relationship to you		
Gifts with a total value of more than \$600	Describe the gifts	Dates you gave Value
per person		the gifts
81		
The Control of the Co	_	\$
Person to Whom You Gave the Gift		
		\$
	-	
Number Street	_	
City State ZIP Code	_	
City State ZIP Code		
Person's relationship to you		

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btor 1	MAYRA LOPEZ ACEVEDO First Name Middle Name Last Na	Case number (if known)	-	
		if a contributions with a total value	of more than \$600	to any charity?
. With	in 2 years before you filed for bankrupt	cy, did you give any gifts or contributions with a total value	of more than 4000	
Ø		6.00,899		
	Yes. Fill in the details for each gift or contri	bution.		
	Gifts or contributions to charities that total more than \$600	Describe what you contributed	Date you contributed	Value
				\$
	Charity's Name		W	
				\$
	Number Street			
	Number Street			
	City State ZIP Code			
	_			
art (List Certain Losses			
		cy or since you filed for bankruptcy, did you lose anything	bocause of theft fi	re other
Ø	saster, or gambling?			
	Yes. Fill in the details.			
	Describe the property you lost and	Describe any insurance coverage for the loss	Date of your loss	Value of property lost
	how the loss occurred	Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.		
		Game St. III.		_
				\$
	_			
Part	7: List Certain Payments or Tran			
Inc	ou consulted about seeking bankruptcy clude any attorneys, bankruptcy petition pro	tcy, did you or anyone else acting on your behalf pay or tra or preparing a bankruptcy petition? eparers, or credit counseling agencies for services required in y		to anyone
_	Yes, Fill in the details.	Description and value of any property transferred	Date payment or	Amount of payment
	Leonides Graulau Quiñones Person Who Was Paid		transfer was made	
	PO Box 711	Attorney's Fees	08/26/2016	s 1,200.00
	Number Street			Ÿ
				\$
	Lares PR 00669 City State ZIP Code			
	leograulau@yahoo.com			
	Email or website address			
	Person Who Made the Payment, if Not You			

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	Description and value of any property tra	ansferred	Date payment or transfer was made	Amount of payment
Consumer Credit Counseling Person Who Was Paid	Certificate of Counseling		08/04/2016	s 50.00
Services of Puerto Rico	-			1
Street Road #2 Km 80.6				\$
Arecibo PR 00612	· -			
City State ZIP Code				
Email or website address				
Person Who Made the Payment, if Not You				
No Yes. Fill in the details.	Description and value of any property t	transferred	Date payment or transfer was made	Amount of payme
Person Who Was Paid	<u></u>			
Number Street				\$
	<u>~</u> *			\$
City State ZIP Code				han property
	s made as security (such as the granting have already listed on this statement.	of a security interest of	or mortgage on your p	roperty).
Yes. Fill in the details.	Description and value of property transferred	or debts paid in ex	change	was made
Yes. Fill in the details. Person Who Received Transfer			change	[마음 - 10]
			change	[마음 : 10 : 10 : 10 : 10 : 10 : 10 : 10 : 1
Person Who Received Transfer	transferred		change	[마음 - 10]
Person Who Received Transfer Number Street	transferred		change	[마음 - 10]
Number Street City State ZIP Code	transferred		change	[마음 - 10]
Person Who Received Transfer Number Street City State ZIP Code Person's relationship to you	transferred		change	[마리크] : " : : : : : : : : : : : : : : : : :
Person Who Received Transfer Number Street City State ZIP Code Person's relationship to you Person Who Received Transfer	transferred		change	

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	n 10 years before you filed for bankrup	toy did you transfer any property	y to a self-settled trust	t or similar device of wh	hich you
/ithir ire a	n 10 years before you filed for ballkrup beneficiary? (These are often called ass	et-protection devices.)	,		
Z N					
	es. Fill in the details.				
		Description and value of the proper	ty transferred		Date transfer
		Description and value of the proper	ty damoionou		was made
N	ame of trust				
_					
4.0-	List Certain Financial Accounts	Instruments, Safe Deposit	Boxes, and Storag	e Units	
0:	List Certain Financial Account	, financial accounts o	r instruments held in	your name, or for your	benefit,
/ith	in 1 year before you filed for bankrupto	y, were any financial accounts o	i ilistruments neid in	your name, or ier your	
lose	ed, sold, moved, or transferred? ude checking, savings, money market, o	or other financial accounts; certi	ficates of deposit; sha	ares in banks, credit un	ions,
rok	erage houses, pension funds, coopera	tives, associations, and other fir	nancial institutions.		
ZÍ N					
1000	es. Fill in the details.				
		Last 4 digits of account number	Type of account or	Date account was	Last balance befo
			instrument	closed, sold, moved, or transferred	closing or transfe
					ar:
	Name of Financial Institution	XXXX	Checking	MANUFACTURE CONTRACTOR	\$
		^^^~	Savings		
	Number Street		☐ Money market		
			La Money market		
			D Berleman		
			☐ Brokerage		
	City State ZIP Code		☐ Brokerage ☐ Other		
	City State ZIP Code		Other		-
	Sily	xxxx	Other	-	\$
	City State ZIP Code Name of Financial Institution	xxxx	Other		\$
	Sily	xxxx	Other		\$
	Name of Financial Institution	xxxx	Other	*	\$
	Name of Financial Institution	xxxx	☐ Other ☐ Checking ☐ Savings ☐ Money market		\$
	Name of Financial Institution	xxxx	Other Checking Savings Money market Brokerage		\$
Do :	Name of Financial Institution Number Street City State ZIP Code you now have, or did you have within 1		Other Checking Savings Money market Brokerage Other	t box or other deposito	,
sec	Name of Financial Institution Number Street City State ZIP Code you now have, or did you have within 1 curities, cash, or other valuables?		Other Checking Savings Money market Brokerage Other	t box or other deposito	,
sec 🗹	Name of Financial Institution Number Street City State ZIP Code you now have, or did you have within 1 surities, cash, or other valuables?		Other Checking Savings Money market Brokerage Other	t box or other deposito	
sec 🗹	Name of Financial Institution Number Street City State ZIP Code you now have, or did you have within 1 curities, cash, or other valuables?		Other Checking Savings Money market Brokerage Other	t box or other deposito	ry for Do you si
sec	Name of Financial Institution Number Street City State ZIP Code you now have, or did you have within 1 surities, cash, or other valuables?	year before you filed for bankru	Other Checking Savings Money market Brokerage Other		ry for
sec 🗹	Name of Financial Institution Number Street City State ZIP Code you now have, or did you have within 1 surities, cash, or other valuables?	year before you filed for bankru	Other Checking Savings Money market Brokerage Other		ry for Do you st have it? No
sec	Name of Financial Institution Number Street City State ZIP Code you now have, or did you have within 1 curities, cash, or other valuables? No Yes. Fill in the details.	year before you filed for bankru Who else had access to it?	Other Checking Savings Money market Brokerage Other		ry for Do you si have it?
sec	Name of Financial Institution Number Street City State ZIP Code you now have, or did you have within 1 surities, cash, or other valuables?	year before you filed for bankru	Other Checking Savings Money market Brokerage Other		ry for Do you st have it? No
sec	Name of Financial Institution Number Street City State ZIP Code you now have, or did you have within 1 curities, cash, or other valuables? No Yes. Fill in the details.	year before you filed for bankru Who else had access to it?	Other Checking Savings Money market Brokerage Other		ry for Do you si have it? No

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First Name Middle Name	Last Name		
ave you stored property in a storage u	ınit or place other than your home within	1 year before you filed for bankruptcy?	?
A No			
Yes. Fill in the details.			Davier of
	Who else has or had access to it?	Describe the contents	Do you st have it?
			□ No
Name of Storage Facility	Name		☐ Yes
	Number Street		
Number Street	Number Street		
	CityState ZIP Code		
	-		
City State ZIP Cod	De la companya de la		
Identify Brangety Vou He	old or Control for Someone Else		
		harround from are storing f	or
Do you hold or control any property the	hat someone else owns? Include any pro	perty you borrowed from, are storing i	01,
or hold in trust for someone.			
Mo No			
Yes. Fill in the details.	Where is the property?	Describe the property	Value
	Where is the property.		
			\$
Owner's Name			M-
34.74 T 19 M T 7 F 10 D 10 T			
	Number Street		
Number Street	Number Street		
A PAIN TO THE TOTAL COLORS		ade.	
	City State ZIP C	ode	
Number Street City State ZIP Co	City State ZIP C	ode	
Number Street City State ZIP Co	City State ZIP C	ode	
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Number Street City State ZIP Count 10: Give Details About Environment 10: Give Details About 10: Give Deta	ironmental Information definitions apply:	cerning pollution, contamination, relea	ases of ium,
Number Street City State ZIP Court 10: Give Details About Environmental law means any federal state of the purpose of Part 10, the following Environmental law means any federal state of the purpose of the purpose of Part 10, the following Environmental law means any federal state of the purpose of the pu	City State ZIP C ironmental Information g definitions apply: al, state, or local statute or regulation contess or material into the air, land, soil, sur	cerning pollution, contamination, relea	ases of ium,
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Number Street City State ZIP Count 10: Give Details About Environmental law means any federa hazardous or toxic substances, wast including statutes or regulations con Site means any location, facility, or putilize it or used to own, operate, or it	city State ZIP C ironmental Information g definitions apply: al, state, or local statute or regulation contess, or material into the air, land, soil, sur itrolling the cleanup of these substances property as defined under any environmentalize it, including disposal sites.	ncerning pollution, contamination, relea face water, groundwater, or other med , wastes, or material. ntal law, whether you now own, operat	e, or
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City State ZIP Count 10: Give Details About Environmental law means any federa hazardous or toxic substances, wast including statutes or regulations con Site means any location, facility, or putilize it or used to own, operate, or the Hazardous material means anything substance, hazardous material, pollutions.	city State ZIP Controlled on the state of th	cerning pollution, contamination, relea face water, groundwater, or other med , wastes, or material. ntal law, whether you now own, operat dous waste, hazardous substance, tox	e, or
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City State ZIP Count 10: Give Details About Environmental law means any federa hazardous or toxic substances, wast including statutes or regulations con Site means any location, facility, or putilize it or used to own, operate, or the Hazardous material means anything substance, hazardous material, pollule port all notices, releases, and proceed. Has any governmental unit notified you have of site	city State ZIP Continued on the state of the	decerning pollution, contamination, released water, groundwater, or other med wastes, or material. Intal law, whether you now own, operated ous waste, hazardous substance, tox f when they occurred. Intal law, whether you now own, operated out waste, hazardous substance, tox f when they occurred.	e, or ic amental law?
City State ZIP Count 10: Give Details About Environmental law means any federa hazardous or toxic substances, wast including statutes or regulations con Site means any location, facility, or putilize it or used to own, operate, or the Hazardous material means anything substance, hazardous material, pollule port all notices, releases, and procees. Has any governmental unit notified your law of the pollule ports. Fill in the details.	city State ZIP Controlled City State ZIP Controlled City State ZIP Controlled City State ZIP Controlled City State City Controlled City State City City City City City City City City	decerning pollution, contamination, released water, groundwater, or other med wastes, or material. Intal law, whether you now own, operated ous waste, hazardous substance, tox f when they occurred. Intal law, whether you now own, operated out waste, hazardous substance, tox f when they occurred.	e, or ic amental law?

City

State

ZIP Ccde

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tor 1	MAYRA LOPEZ ACEVEDO	Name	Case number (if known)	
	First Name Middle Namé Last	(Walling		
	e you notified any governmental unit o	f any release of hazardous mater	al?	
A	No			
	Yes. Fill in the details.		Environmental law, if you know it	Date of notice
		Governmental unit	Environmental law, it you know it	
	Name of site	Governmental unit	-	
		-		
	Number Street	Number Street		
		City State ZIP Code	-	
		City Cities 211 VIII		
	City State ZIP Code	-		
			ov anvironmental law? Include se	ttlements and orders.
	re you been a party in any judicial or ac	aministrative proceeding under a	ly environmentariaw. morade 30	
	No			
	Yes. Fill in the details.			Status of the
		Court or agency	Nature of the case	case
	Case title			Pending
	Case title	Court Name		and the second second
				On appeal
		Number Street		Concluded
	Case number	City State ZIP C	ode	
		usiness or Connections to An		
₩.	thin 4 years before you filed for bankru A sole proprietor or self-employed A member of a limited liability con A partner in a partnership An officer, director, or managing of No. None of the above applies. Go to Yes. Check all that apply above and f	I in a trade, profession, or other a mpany (LLC) or limited liability pa executive of a corporation ting or equity securities of a corporation	activity, either full-time or part-time rtnership (LLP) pration usiness. ess Employer Ide	e ntification number le Social Security number or lTIN.
			EIN:	
	Number Street	Name of accountant or bookkee	ner Dates busine	ss existed
		Name of accountant of bookkee	per Dates such	
			From	To
	City State ZIP Code			
	39457	Describe the nature of the busin		ntification number
	Business Name		Do not include	le Social Security number or ITIN.
			EIN:	
	Number Street			
	Number Street	Name of accountant or bookkee		ess existed
	Number Street	Name of accountant or bookkee	eper Dates busine	ess existed
	Number Street	Name of accountant or bookkee	eper Dates busine	

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	Middle Name	'EDO Last Nar	ne	Case number (if known)
			Describe the nature of the business	Employer Identification number
			Describe the nature of the business	Do not include Social Security number or ITIN
Business Name				EIN:
				Dates business existed
Number Street			Name of accountant or bookkeeper	Dates dualities existed
				From To
City	State	ZIP Code		
thin 2 years befor	e you filed fo	or bankrupt	cy, did you give a financial statem	ent to anyone about your business? Include all financial
stitutions, creditor	rs, or other p	arties.		
No Yes. Fill in the de	etails below.			
res. rin in the di	statio belevi.		Date issued	
			Date 199894	
Name			MM / DD / YYYY	
Number Street				
	State	ZIP Code		
City	Jeaco			
City	State			
City	State			
12: Sign Belo	ow			
12: Sign Beld	DW .	s Statemer	nt of Financial Affairs and any attac	chments, and I declare under penalty of perjury that the
12: Sign Belo	ow Iswers on thi	s Statemer I understar	ot of Financial Affairs and any attac nd that making a false statement, c n result in fines up to \$250,000, or	chments, and I declare under penalty of perjury that the concealing property, or obtaining money or property by fra imprisonment for up to 20 years, or both.
12: Sign Belo	nswers on thi and correct. h a bankrupt	l understar cy case cai	nt of Financial Affairs and any attac nd that making a false statement, c n result in fines up to \$250,000, or	chments, and I declare under penalty of perjury that the concealing property, or obtaining money or property by fraimprisonment for up to 20 years, or both.
12: Sign Belo	nswers on thi and correct. h a bankrupt	l understar cy case cai	ot of Financial Affairs and any attac nd that making a false statement, c n result in fines up to \$250,000, or	chments, and I declare under penalty of perjury that the concealing property, or obtaining money or property by fra imprisonment for up to 20 years, or both.
12: Sign Belo	nswers on thi and correct. h a bankrupt	l understar cy case cai	nt of Financial Affairs and any attace and that making a false statement, on result in fines up to \$250,000, or	chments, and i declare under penalty of perjury that the concealing property, or obtaining money or property by fra imprisonment for up to 20 years, or both.
12: Sign Belo	nswers on thi and correct. h a bankrupt 1341, 1519, a	l understar cy case cai	nt of Financial Affairs and any attacked that making a false statement, on result in fines up to \$250,000, or	imprisonment for up to 20 years, or both.
I have read the an answers are true ain connection with 18 U.S.C. §§ 152, Signature of Det	nswers on thi and correct. h a bankrupt 1341, 1519, a	l understar cy case cai	result in fines up to \$250,000, or	or 2
have read the an answers are true a in connection with 18 U.S.C. §§ 152, Signature of Details 18	aswers on thi and correct. h a bankrupt 1341, 1519, a	runderstar cy case car nd 3571.	result in fines up to \$250,000, or Signature of Debt	or 2
I have read the an answers are true and in connection with 18 U.S.C. §§ 152, Signature of Details Date 130	aswers on thi and correct. h a bankrupt 1341, 1519, a	runderstar cy case car nd 3571.	result in fines up to \$250,000, or Signature of Debt	or 2
I have read the an answers are true and in connection with 18 U.S.C. §§ 152, Signature of Details Date 130 Date 130 No	aswers on thi and correct. h a bankrupt 1341, 1519, a	runderstar cy case car nd 3571.	result in fines up to \$250,000, or Signature of Debt	or 2
I have read the an answers are true and in connection with 18 U.S.C. §§ 152, Signature of Details Date 130	aswers on thi and correct. h a bankrupt 1341, 1519, a	runderstar cy case car nd 3571.	result in fines up to \$250,000, or Signature of Debt	or 2
have read the an answers are true a in connection with 18 U.S.C. §§ 152, Signature of Det Date 130 Did you attach ad No Yes	aswers on thi and correct. h a bankrupt 1341, 1519, a btor 1	es to Your	Signature of Debt Date Statement of Financial Affairs for I	imprisonment for up to 20 years, or both. or 2 Individuals Filing for Bankruptcy (Official Form 107)?
I have read the an answers are true and in connection with 18 U.S.C. §§ 152, Signature of Det Date 130 Did you attach ad No Yes Did you pay or ago No	swers on thi and correct. h a bankrupt 1341, 1519, a btor 1	es to Your	result in fines up to \$250,000, or Signature of Debt	or 2 Individuals Filing for Bankruptcy (Official Form 107)?

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Fill in this information to identify your case:		
Debtor 1 MAYRA LOPEZ ACEVEDO First Name Middle Name	Last Name	
Debtor 2 (Spouse, if filing) First Name Middle Name	Last Name	
United States Bankruptcy Court for the: District of Puerto Ricco	2	☐ Check if th
Case number (If known)		amended f

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1.	For any creditors that you listed in Part 1 of Schedule D: Creditorinformation below.	editors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Officen no below.		
	Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?	
	Creditor's name: POPULAR MORTGAGE	Surrender the property.	☐ No ☐ Yes	
	Description of Apartment #206 located at Cond. Paseo	Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement.	☐ Yes	
	property securing debt: Degetau, Caguas, PR 00727	Retain the property and [explain]:		
	Creditor's	☐ Surrender the property.	□ No	
	name:	☐ Retain the property and redeem it.	☐ Yes	
	Description of property	Retain the property and enter into a Reaffirmation Agreement.		
	securing debt:	Retain the property and [explain]:		
	Creditor's	☐ Surrender the property.	□ No	
	name:	☐ Retain the property and redeem it.	☐ Yes	
	Description of property securing debt.	☐ Retain the property and enter into a Reaffirmation Agreement.		
	securing debt.	Retain the property and [explain]:	·	
	Creditor's	☐ Surrender the property.	□ No	
	name:	Retain the property and redeem it.	☐ Yes	
	Description of property	Retain the property and enter into a Reaffirmation Agreement.		
	securing debt:	Retain the property and [explain]:		

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Debtor 1

MAYRA LOPEZ ACEVEDO

Case number	(If known)
-------------	-----------	---

					121100000000000000000000000000000000000
Part 2:	List Your	Unexpired	Personal	Property	Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

escribe your unexpired personal property leases	Will the lease be assumed?
ssor's name:	□ No
escription of leased	☐ Yes
perty:	
ssor's name:	☐ No
	☐ Yes
scription of leased operty:	
ssor's name:	□ No
	☐ Yes
escription of leased operty:	
essor's name:	□ No
5550 O Humo.	☐ Yes
escription of leased roperty:	
essor's name:	□ No
	☐ Yes
scription of leased operty:	
essor's name:	□ No
	Yes
Description of leased property:	
.essor's name:	□ No
7.7.7.6.30000000000000000000000000000000	☐ Yes
Description of leased property:	

Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease.

* Many Tops Auvido.	×
Signature of Debtor 1	Signature of Debtor 2
Date 9 30 1 6	Date MM / DD / YYYY

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Fill in this information to identify your case:	Check one box only as directed in this form and in Form 122A-1Supp:
Debtor 1 MAYRA LOPEZ ACEVEDO First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: District of Puerto Rico Case number (If known)	 ✓ 1. There is no presumption of abuse. ✓ 2. The calculation to determine if a presumption of abuse applies will be made under Chapter 7 Means Test Calculation (Official Form 122A–2). ✓ 3. The Means Test does not apply now because of qualified military service but it could apply later.
Line	☐ Check if this is an amended filing

Official Form 122A-1

Chapter 7 Statement of Your Current Monthly Income

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file Statement of Exemption from Presumption of Abuse Under § 707(b)(2) (Official Form 122A-1Supp) with this form.

Pa	art 1: Calculate Your Current Monthly Incom	ie			
1.	What is your marital and filing status? Check one or Not married. Fill out Column A, lines 2-11. Married and your spouse is filing with you. Fill or	out both Columns A and B, lines 2-11.			
	Married and your spouse is NOT filing with you	. You and your spouse are:			
	The Living in the same household and are not	legally separated. Fill out both Colur	nns A ai	nd B, lines 2	2-11.
	Living separately or are legally separated. under penalty of perjury that you and your spo	Fill out Column A, lines 2-11; do not fouse are legally separated under nonly tinclude evading the Means Test req	ill out C bankrup uiremen	olumn B. By tcy law that its. 11 U.S.0	y checking this box, you declare applies or that you and your C. § 707(b)(7)(B).
	Fill in the average monthly income that you receive bankruptcy case. 11 U.S.C. § 101(10A). For example August 31. If the amount of your monthly income varie Fill in the result. Do not include any income amount m income from that property in one column only. If you h	ed during the 6 months, add the income than once. For example, if both s	ne for all pouses te \$0 in	6 months a own the sar the space.	and divide the total by 6.
			Colum. Debtor		Debtor 2 or non-filing spouse
	Your gross wages, salary, tips, bonuses, overtime (before all payroll deductions).		\$	0.00	\$
	 Alimony and maintenance payments. Do not include Column B is filled in. 		\$	0.00	\$
4.	4. All amounts from any source which are regularly p of you or your dependents, including child suppo from an unmarried partner, members of your househor and roommates. Include regular contributions from a filled in. Do not include payments you listed on line 3.	old, your dependents, parents, spouse only if Column B is not	\$	0.00	\$
5	 Net income from operating a business, profession or farm Gross receipts (before all deductions) 	1, Debtor 1 Debtor 2 \$			
	Ordinary and necessary operating expenses	- \$ \$			
	Net monthly income from a business, profession, or f	arm \$_0.00 \$ copy	\$	0.00	\$
6	 Net income from rental and other real property Gross receipts (before all deductions) 	Debtor 1 Debtor 2 \$			
	Ordinary and necessary operating expenses	- \$ \$ Copy_		0.00	
	Net monthly income from rental or other real property	\$ 0.00 \$ here→	\$	0.00	\$
7	7. Interest, dividends, and royalties		\$	0.00	\$

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otor 1	MAYRA LOPEZ ACEVEDO First Name Middle Name Last Name		Case number	(if known)		
			Column A Debtor 1		Column B Debtor 2 or non-filing spouse	
Unemplo	oyment compensation		\$	0.00	\$	
Do not e	enter the amount if you contend that the amount	received was a benefit				
	e Social Security Act. Instead, list it here:					
	our spouse,					
Pension	or retirement income. Do not include any amunder the Social Security Act.	ount received that was a	\$	0.00	\$	
Do not in	from all other sources not listed above. Spe nclude any benefits received under the Social S tim of a war crime, a crime against humanity, or n. If necessary, list other sources on a separate	ecurity Act or payments receive international or domestic	ved			
			\$	0.00	\$	24
			\$	0.00	\$	
Total a	amounts from separate pages, if any.		+ \$	0.00	+\$	
. Calcula column.	tte your total current monthly income. Add lin Then add the total for Column A to the total for	nes 2 through 10 for each Column B.	\$	0.00	\$	Total current monthly income
12b. T	Copy your total current monthly income from line fultiply by 12 (the number of months in a year). The result is your annual income for this part of the the median family income that applies to	he form.			12b.	x 12 \$ 0.00
Fill in th	ne state in which you live.	Puerto Rico				
Fill in th	ne number of people in your household.	3				
To find	ne median family income for your state and size a list of applicable median income amounts, go tions for this form. This list may also be available	online using the link specified	I in the separat	te	13.	\$ 23,861.00
	o the lines compare?					
14a. 🔳	Line 12b is less than or equal to line 13. On the Go to Part 3.	ne top of page 1, check box 1,	There is no pr	resumption	of abuse.	
14b. 🗖		age 1, check box 2, The presu	umption of abu	se is deter	mined by Form 122	2A-2.
Part 3:	Sign Below					
	By signing here, I declare under penalty of per	jury that the information on thi	s statement an	nd in any a	ttachments is true a	and correct.
) / V	terrdo x				
	Signature of Debtor 1		Signature of De	ebtor 2		
	alant.					
	Date MM / DD / YYYY		Date MM / DI	D / YYYY	-	
	Date MM / DD / YYYYY If you checked line 14a, do NOT fill out or the state of the	file Form 122A–2.	Date MM / DI	D /YYYY	-	